

WOOD DESTROYING PESTS INSPECTION REPORT

NO 634720

Firm (PCO) Carson Valley Ex. License No 5599 Inspection Date 9-19-2001
Address P.O. Box 2306 Lodi, CA 95240 FHA/VA/Escrow or Mortgage No
Address of Property Inspected 1373 Boyan Lodi, CA 95240
Inspection Ordered by Thomas Vander Loo - Coldwell Banker
Inspection Report Sent to [redacted]
Owner's Name and Address [redacted]

This inspection was made only to determine VISIBLE evidence of the presence or absence of noted organisms. It is made only in those areas of noted structures which were readily accessible and visible. Inspection has been made in the areas in which infestations are most likely to occur. No inspection was made in inaccessible areas which might require breaking into, breaking apart, dismantling, removal or moving of an object, including but not limited to moldings, floor coverings, siding, ceilings, floors, furniture, appliances, and/or personal possessions.

THIS IS NOT A STRUCTURAL DAMAGE REPORT, neither is it a WARRANTY as to the absence of wood-destroying organisms. The report is not to be construed to constitute a guarantee against future infestations, but is indicative of the condition of the premises ON THE DATE OF THE INSPECTION. This report is NOT intended to determine the presence of organisms which may be detrimental to human health.

- [X] This is not a structural damage report. [X] This is not a guarantee against future infestations.
[X] This is not a structural soundness report. (Structural soundness should be determined by a qualified building expert.)
[X] This is not a mold inspection report.

Neither I nor the company for which I am acting have had, presently have, or contemplate having any interest in the property. I do further state that neither I nor the company for which I am acting is financially associated in any way with or related to any party to this transaction.

Pam Cipolletti Type or Print Name of Inspector License No 5599 Signature of Inspector

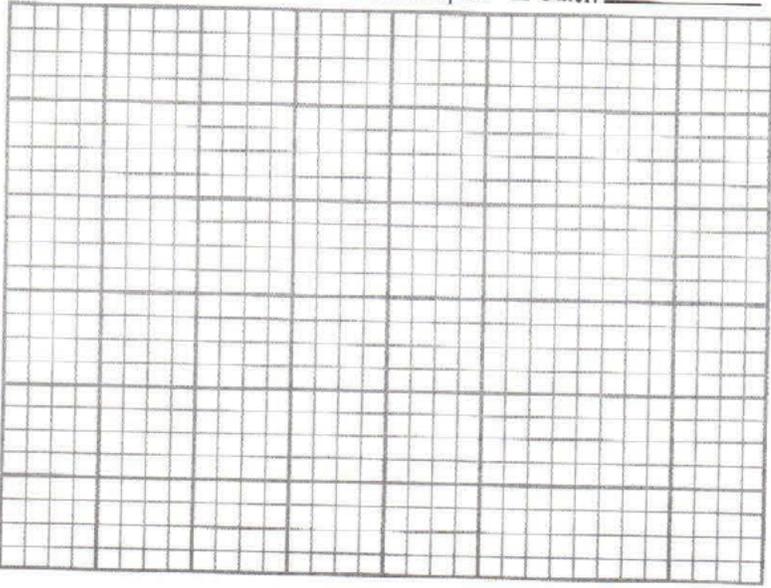
INFESTATION: (See diagram and explanation below.)

Table with columns: Evidence of, Active, Inactive. Rows: Termites, Other Wood-destroying Insects, Wood-destroying Fungi.

CONDITIONS CONDUCTIVE TO INFESTATION:

- Earth-Wood Contacts Yes No
Faulty Grades Yes No
Insufficient Ventilation Yes No
Excessive Moisture Yes No
Cellulose Debris Yes No

Location of Tag: Under Sink Crawl Space Other:



GRAPH EXPLANATIONS:

All clear

Scale (optional) Treatment Date Area Treated Product Used EPA Registration No.

I have received the original or a legible copy of this form.

Signature of Purchaser Date