

TENNESSEE EXTERMINATORS # 5286

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LICENSED - BONDED - INSURED

CARPENTER BEE CONTRACT # _____

Person Requesting Service _____ Telephone _____ Inspection Date ____/____/____ Service Date ____/____/____ Arrival Time ____:____ AM/PM

Today's Service is for: ___ Dusting Active Galleries ___ Chemical Pre-Treatment ___ Other _____

Cabin Name: _____ Address: _____

City _____ TN _____ Email: _____

___ Ck-out 10-11 ___ Turn ___ Ck-in ___ Open Gate _____ Door _____ Alarm _____

THIS IS A **CONTRACT** FOR (WDO) **WOOD DESTROYING ORGANISMS**, REQUIRED BY THE STATE OF TENNESSEE WHEREBY THE CHARTER COMPANY AND INDIVIDUAL APPLICATOR HAS TO BE CURRENTLY LICENSED IN WOOD DESTROYING ORGANISMS. THIS INSPECTION CONTRACT IS FOR CARPENTER BEE TREATMENT **PRIOR TO EXECUTION**. _____

Initials _____

Warning: Pesticides can be harmful. Keep children and pets away from pesticide applications until dry, dissipated or aerated.

Areas Visible Damage

Facia	N S E W	Exterior	N S E W
Hand Railing	N S E W	Fences	N S E W
Furniture	N S E W	Soffit	N S E W
Gable	N S E W	Deck Ceilings	N S E W

Materials Used

Application Rate

___ Delta Dust 432-772.05%	_____ oz
___ Drione 432-992 Pyrethrins 1.0%	_____ oz
___ Tempo 1% Dust 432-1373 1%	_____ gal
___ TENGARD SFR 70506-6, 0.5%=1.5oz- 1gal @ 100sf	_____ gal

(Graft) FRONT VIEW

This Contract Invoice has not factored in additional cost to cover any follow up applications. This invoice covers today's service only. Follow up applications for different treatments or additional areas not treated are billable. If this is a Chemical Pre-Treatment to prevent carpenter bees from cutting galleries (holes) in the wood, all galleries (holes) and woodpecker damage must be repaired or sealed prior to this treatment for warranty. **NO ONE** can be on or in property during this treatment NOR any parked vehicles.

Customer has read this contract and has kept a copy for themselves: Initials _____

Notes: _____

Billing

___ Email	# 95747 Technician's Signature	____/____/____	Previous Balance	\$ _____
___ In Person		Date	Today's Service	\$ _____

Payment information link is in email.

___ US Postal	_____	____/____/____	Total:\$	_____
___ PIC	Customer Signature Authorizes Services	Date	Due: Net 30 days	