

ALL TIME EXTERMINATING, LLC
 1354 West College Street
 Murfreesboro, TN 37129
 615-848-0021

STATEMENT

Acct: 9877
 Date: 10/10/11
 Page: 1

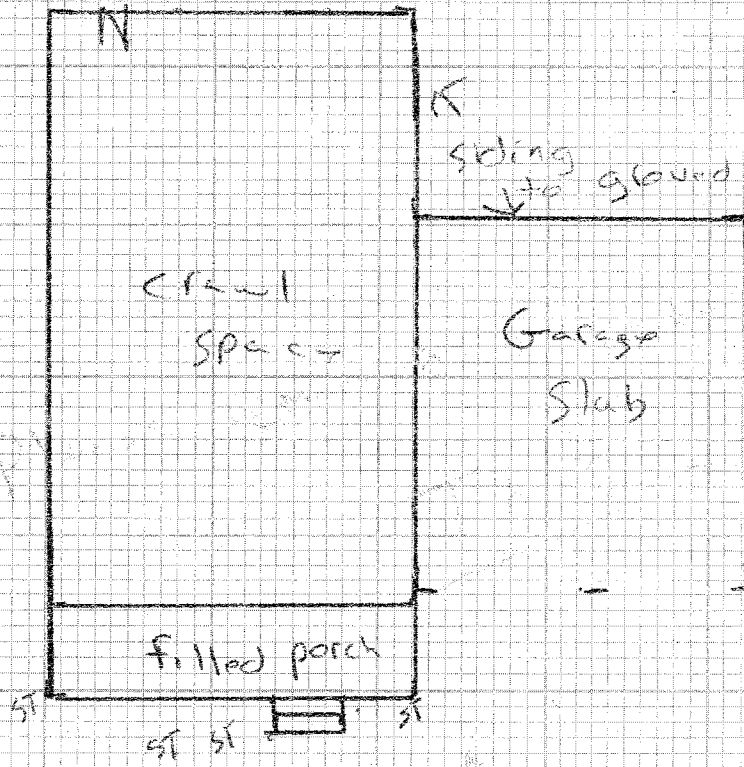
Jim McCormack
 2220 Higgins Lane
 Murfreesboro, TN 37130

SERVICE TO
 McCormack, Jim
 141 Claybrook Lane
 Antioch, TN 37013

DATE	DESCRIPTION	AMOUNT	BALANCE		
09/30/11	Invoice # 123792 One Time Pest Control Treatment - OC	125.00	125.00		
10/07/11	Invoice # 123983 Mold Treatment	185.00	310.00		
10/07/11	Invoice # 123984 SUB-TERR. TERMITE TREATMENT	615.00	925.00		
<p>If bill is not paid within 0-30 days there will be a 5% late charge added.</p>					
Account #	0-30 Days	31-60 Days	61-90 Days	Over 90	AMOUNT DUE
9877	925.00	0.00	0.00	0.00	925.00

All Time Exterminating, LLC
 1106 W. College Street
 Murfreesboro, TN 37129
 615-848-0021 • Fax 615-849-9021

PURCHASER / OWNER <i>Jim McCormick</i>		GRID#	
ADDRESS <i>141 Claybrook Ln</i>		CITY <i>Antioch</i>	STATE <i>TN</i>
W. PH. <i>615-796-6898</i>		H. PH. <i>N/A</i>	ZIP <i>37013</i>
			SCALE USED <i>1-1</i>



Live termites under stones and in mulch

THIS REPORT IS ISSUED FOR:

Initial Inspection Report

Periodic Termite Inspection

Real Estate Transfer

THIS REPORT IS SUBJECT TO ALL CONDITIONS ENUMERATED ON REVERSE SIDE.
 THIS REPORT IS NOT INTENDED TO BE A COMPLETE DISCLOSURE OF ALL ACTIVE OR PREVIOUSLY ACTIVE WOOD DESTROYING ORGANISMS.

CONDITIONS CONDUCTIVE TO INFESTATION: Conditions Conducive To Infestation • means conditions that exist in a structure that favor the development of wood-destroying organisms. The following conditions conducive to infestation from wood-destroying organisms were found at the time of inspection. The location of these conditions conducive to infestation are indicated on this diagram.

Wood to earth contact
 Wood debris in crawl area
 Insufficient ventilation

COMMENTS: *Live termites in mulch at corner of home to be treated by Alltime.*

KEYS		TYPE		BAITING / MONITORING		LIQUID BARRIER	
TYPE INFESTATION	LOCATION	CONSTRUCTION					
<input type="checkbox"/> AI- Active Infestation	<input type="checkbox"/> Sills	<input type="checkbox"/> Floating Slab	Form II	<input type="checkbox"/> Yes <input type="checkbox"/> No	Form II	<input type="checkbox"/> Yes <input type="checkbox"/> No	
<input type="checkbox"/> PI- Previous Infestation	<input type="checkbox"/> Joists / Plates	<input type="checkbox"/> Supported Slab	Foam Application	<input type="checkbox"/> Yes <input type="checkbox"/> No	Foam Application	<input type="checkbox"/> Yes <input type="checkbox"/> No	
<input type="checkbox"/> SA- Suspected Activity	<input type="checkbox"/> Subfloor	<input type="checkbox"/> Monolithic Slab	Linear Footage		Linear Footage	<i>170</i>	
<input checked="" type="checkbox"/> ST- Subterranean Termites	<input type="checkbox"/> Walls / Studs	<input type="checkbox"/> Brick	Number of Active St.		Square Footage		
<input type="checkbox"/> DT- Drywood Termites	<input type="checkbox"/> Finished Trim	<input type="checkbox"/> Stone	Number of Monitoring St.		Bath Trap		
<input type="checkbox"/> PPB- Powder Post Beetles	<input type="checkbox"/> Interior Trim	<input type="checkbox"/> Solid Poured	Number of Above Ground		# Vents to be Installed		
<input type="checkbox"/> OHB- Old House Borers	<input type="checkbox"/> Paneled Walls	<input type="checkbox"/> Hollow Block	Number of Corings		Type: Foundation <input type="checkbox"/> Well <input type="checkbox"/>		
<input type="checkbox"/> MC- Moisture Condition	<input type="checkbox"/> Doors	<input type="checkbox"/> Craw	Total Stations		Type Termiticide used		
<input type="checkbox"/> V Vents Needed	<input type="checkbox"/> Windows	<input type="checkbox"/> Basement			Percentage used		
<input type="checkbox"/> WEC- Wood Earth Contact	<input type="checkbox"/> Framing	<input type="checkbox"/> Exterior Insulating	A A/C M Mulch		Total to be used		
<input type="checkbox"/> X- Possible Damage	<input type="checkbox"/> Steps	<input type="checkbox"/> Finishing System	W Water D Downspout				
Well - YES <input type="checkbox"/> NO <input type="checkbox"/>				Moisture Barrier <input type="checkbox"/> Yes <input type="checkbox"/> No	Moisture Barrier <input type="checkbox"/> Yes <input type="checkbox"/> No		

AUTHORIZED COMPANY SIGNATURE <i>[Signature]</i>	DATE <i>9-29-11</i>	PURCHASER / OWNER SIGNATURE <i>OK Per Jim McCormick</i>	DATE <i>9-29-11</i>
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TERMITE CONTROL AGREEMENT

All Time Exterminating, LLC

1106 W. College Street
Murfreesboro, TN 37129

35775

615-848-0021 • Fax 615-849-9021

Purchaser Jim McCormick Home Phone 615-791-6898 Work Phone _____
Mailing Address 141 Claybrook Ln
City Antioch State Tn Zip Code 37013
Property Address 141 Claybrook Ln
City Antioch State Tn Zip Code 37013
Description of Structure(s) Covered Home

Effective with the date of the initial treatment and for one year thereafter for the sum of \$ 615 +, All Time Exterminating, LLC will provide the necessary services to the identified property to control or protect against subterranean termites (*Reticulitermes spp.*, *Heterotermes spp.*). This plan does not control or protect against formosan subterranean termites (*Coptotermes spp.*).

All Time Exterminating, LLC will extend protection annually to the Purchaser for so long as he or she may own the property for \$ 600 per year payable on or before the end of the previous annual period. After the third annual period and each annual period thereafter, All Time Exterminating, LLC reserves the right to revise the annual extension charge.

During the term of this Service Agreement, any further treatment found necessary by All Time Exterminating, LLC will be performed free of charge. All Time Exterminating, LLC will re-inspect the identified property at any time the Purchaser requests it or if All Time Exterminating, LLC believes it necessary. DUE TO THE NATURE OF CONSTRUCTION, THE EXTENT OF EXISTING TERMITE DAMAGE, THE DEGREE OF TERMITE ACTIVITY, AND/OR APPLICATION RESTRICTIONS, THE AGREEMENT DOES NOT GUARANTEE AGAINST, NOR SHALL ALL TIME EXTERMINATING, LLC BE RESPONSIBLE FOR, PRESENT OR FUTURE DAMAGE TO PROPERTY OR CONTENTS, NOR PROVIDE FOR REPAIRS OR COMPENSATION THEREOF.

In the event of additions or alterations to the identified property, Purchaser must give prior notice and arrange with All Time Exterminating, LLC for additional service at the expense of Purchaser. Such additions or alterations may also require an adjustment to the annual extension charge.

Upon transfer of ownership of the identified property, this Service Agreement may be continued upon the terms and conditions on the reverse side.

ANY ADDITIONAL PROVISION ATTACHED HERETO, INCLUDING THE ARBITRATION AGREEMENT AND THE OTHER TERMS AND CONDITIONS ON THE REVERSE SIDE AND THE INSPECTION GRAPH DATED 9-29-11 ARE PART OF THIS SERVICE AGREEMENT.

NOTE: CUSTOMER MAY CANCEL THIS AGREEMENT AT ANY TIME PRIOR TO MIDNIGHT OF THE THIRD BUSINESS DAY AFTER THE DATE OF THIS AGREEMENT. DELIVERY OF SERVICES WILL OCCUR AFTER THE THREE-DAY PERIOD UNLESS REQUESTED TO BE SOONER BY CUSTOMER, IN WHICH CASE CUSTOMER WAIVES RIGHT TO CANCEL.

Company Representative [Signature] Date 9-29-11
Purchaser ok as per Jim McCormick Date 9-29-11

MOISTURE INSPECTION REPORT

NAME & ADDRESS OF INSPECTION COMPANY <i>All Time</i>	ADDRESS OF PROPERTY INSPECTED <i>Jim McCormick</i>	
<i>1354 W. College St</i>	<i>141 Claybrook Ln</i>	
<i>M Boro Tn 37129</i>	<i>Antioch Tn 37013</i>	
DATE OF INSPECTION <i>9-29-11</i>	INSPECTION FEE <i>185⁰⁰</i>	INSPECTION <i>treatment</i>

BASED ON A CAREFUL INSPECTION OF THE READILY ACCESSIBLE AREAS OF THE UNDERSTRUCTURE (AS DESCRIBED ON THE REVERSE SIDE) OF THE PROPERTY LISTED ABOVE:

There is evidence of the presence of wood destroying fungi below the floor level of the first main floor. YES NO

There is evidence of the presence of excessive moisture conditions below the floor level of the first main floor. (If yes, describe under comments) YES NO


At the time of our inspection, there were visible damaged wooden members below the floor level of the first main floor caused by fungi. YES NO

IF ANY DAMAGE IS OBSERVED (AS SHOWN ABOVE) THAT DAMAGE WILL (CHECK ONE BELOW):

- Be corrected or has been corrected by this company.
- Be corrected by another company, see attached contract.
- NOT** be corrected by this company. This company recommends that damage be evaluated by a qualified building expert and that needed repairs be made.

WERE ANY AREAS OF THE UNDERSTRUCTURE OBSTRUCTED OR INACCESSIBLE? (If yes, describe under comments) YES NO

COMMENTS
All Time will treat all exposed wood in crawl space with timbor for fungus.

40% Renewal optional SIGNATURE OF INSPECTOR 

This report shall not be valid until the following statement of the property owner(s) or their duly authorized representatives is signed:

THE UNDERSIGNED OWNER(S) OF THE ABOVE DESCRIBED INSPECTED PROPERTY HEREBY ACKNOWLEDGE THAT THEY ARE UNAWARE OF ANY PREVIOUS MOISTURE DAMAGE OR DIFFICULTIES INVOLVING MOISTURE THROUGHOUT THEIR OWNERSHIP OF SAID PROPERTY, OTHER THAN AS REPORTED ABOVE.

DATE _____ PROPERTY OWNER _____ PROPERTY OWNER _____

ACKNOWLEDGEMENT: Purchaser acknowledges that he has received a copy of this report.

DATE ACKNOWLEDGED *9-29-11* PURCHASER'S SIGNATURE *X OK as per Jim McCormick*

All Time Exterminating, LLC
1106 W. College Street
Murfreesboro, TN 37129
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DATE 10/7/11	TIME IN _____ OUT _____	<input checked="" type="checkbox"/> REGULAR <input type="checkbox"/> ONE-TIME <input checked="" type="checkbox"/> RESIDENTIAL	<input type="checkbox"/> INSIDE <input type="checkbox"/> OUTSIDE <input type="checkbox"/> COMMERCIAL
NAME Jim McCormick			
ADDRESS 147 Claybrook Ln			
CITY, STATE, ZIP Antioch TN 37013		PHONE _____	

<input type="checkbox"/> Pest Control	<input type="checkbox"/> Inspection
<input checked="" type="checkbox"/> Termites	<input type="checkbox"/> Pretreatment
<input type="checkbox"/> Rodents	<input type="checkbox"/> Spraying
<input type="checkbox"/> _____	<input type="checkbox"/> _____

CHEMICALS USED	AMOUNT	%	EPA NUMBER
Adonis	166g	5	228-648

DESCRIPTION / REMARKS	AMOUNT

License No. 84077 BK	Serviced By	TAX	
Customer Signature		TOTAL	615 00

X
SERVICE REPORT No 4570


All Time Exterminating, LLC
 1108 W College Street
 Murfreesboro. TN 37129
 615-848-0021 • Fax 615-849-9021

DATE 10/07/11	TIME IN: 3pm OUT: _____	<input checked="" type="checkbox"/> REGULAR <input type="checkbox"/> ONE-TIME	<input checked="" type="checkbox"/> INSIDE <input type="checkbox"/> OUTSIDE
NAME Jim McCormick		<input checked="" type="checkbox"/> RESIDENTIAL <input type="checkbox"/> COMMERCIAL	
ADDRESS 41 Clay Brooke Ln			
CITY, STATE, ZIP 37013		PHONE	

<input type="checkbox"/> Termites	<input type="checkbox"/> Inspection
<input type="checkbox"/> Rodents	<input type="checkbox"/> Pretreatment
<input checked="" type="checkbox"/> Fungus	<input checked="" type="checkbox"/> Spraying

CHEMICALS USED	AMOUNT	%	EPA NUMBER
Timbor	11941	10%	

DESCRIPTION / REMARKS	AMOUNT
Treated all exposed wood in crawl space with fungicide	185
TAX	
TOTAL	185⁰⁰

License No. 22779a Serviced By 

Customer Signature **X** *Thanks*

SERVICE REPORT No 0320

SERVICE RECORD

All Time Exterminating, LLC

SERVICING BRANCH ADDRESS

CUSTOMER:

Jim McCormack
141 Claybrook Lane
Antioch, TN 37013

1106 W. College Street

Murfreesboro, TN 37129

615-848-0021 • Fax 615-849-9021

BRANCH	ACCOUNT NO.	RT.	G. DAY	GRID	TELEPHONE NO.	FQ.	PRODUCTION	TIME IN	TIME OUT
	9877				796-6898				

SPECIAL SERVICE INFORMATION:

615-216-8005 (H)

Snakes, mice, bugs

OT

\$125.00

	CASH
	CHECK
AMOUNT PAID	

TODAY, I PERFORMED SERVICES IN THE FOLLOWING AREA

TARGET PEST(S):

1 Carpenter Ants
 2 Cockroaches

3 Ants
 4 Fleas

6 Silverfish
 Spiders

8 Ticks
 Wasp Nest

18 Rats
 19 Mice

INSIDE	OUTSIDE	MATERIALS USED	%	AMOUNT
<input checked="" type="checkbox"/> KITCHEN SINK, DISPOSAL DISHWASHER AREAS	<input checked="" type="checkbox"/> PERIMETER OF HOUSE	Dursban G (Chlorpyrifos)	.5%	
<input checked="" type="checkbox"/> KITCHEN AREA	<input checked="" type="checkbox"/> PORCHES/PATIOS/DECKS	Dursban L.O. (Chlorpyrifos)	.25%	
<input type="checkbox"/> REFRIGERATOR AREA	<input checked="" type="checkbox"/> LEAVES/WINDOWS WELLS/ DOOR FRAMES/WINDOW FRAMES	Ficam D (Bendiocarb)	1%	
<input checked="" type="checkbox"/> WASHER/DRYER AREA	<input type="checkbox"/> TRASH CONTAINER AREA	Ficam W (Bendiocarb)	.25%	
<input checked="" type="checkbox"/> WATER HEATER/HEATING UNIT AREA	<input type="checkbox"/> WOOD PILE	Gencor (Hydroprene)	.12%	
<input checked="" type="checkbox"/> ALL BATHROOM AREAS	<input type="checkbox"/> POOL HOUSE	Maxforce Bait (Hydramethylnon)	1.65%	
<input checked="" type="checkbox"/> FIREPLACE AREA	<input type="checkbox"/> PET AREAS	PT 270 Dursban (Chlorpyrifos)	.5%	
<input type="checkbox"/> ATTIC	<input checked="" type="checkbox"/> GARAGE/CARPORT/STORAGE & UTILITY AREAS	PT 565 (Pyrethrin)	.5%	
<input checked="" type="checkbox"/> BASEMENT/CRAWL SPACE	<input type="checkbox"/> OTHER	Snap Traps		
<input type="checkbox"/> LIVING AREAS	<input type="checkbox"/> CUSTOMER STATES HOME IS CURRENTLY COVERED BY A TERMITE CONTRACT	Talon G (Brodifacoum)	.005%	
<input type="checkbox"/> OTHER	<input type="checkbox"/> CUSTOMER REQUESTS A TERMITE INSPECTION	Tempo (Cyfluthrin)	.05%	
		Safrotin (Propetamphos)	.5%	
		Bell Rodent Cake (Diphacinone)	.005%	
		Eaton Bait Block (Diphacinone)	.0052%	
		Glue Boards		
		Talstar	.125	1 bag
		Talstar	.402	10 gal
		13P 100		
		Contract Packs		

James J. Jensen 8/064
SERVICE TECHNICIAN'S SIGNATURE

9-29-11
DATE

CUSTOMER'S SIGNATURE