

TERMITE AND WOOD DECAY INSPECTION							DATE INSPECTED	BUILDING NUMBER
INSTALLATION				TYPE BUILDING		INSPECTOR		
				PERM	TEMP			
I. FAVORABLE TERMITE AND FUNGI INFESTATION CONDITIONS								
WOOD IN CONTACT WITH SOIL				POOR VENTILATION UNDER BUILDING				
FORM BOARDS LEFT IN CONCRETE				WATER COLLECTIONS UNDER BUILDING				
WOOD MEMBERS SET IN CONCRETE FLOOR				VINES AND SHRUBS AGAINST BUILDING				
WOOD STEPS IN CONTACT WITH SOIL				LEAKY PLUMBING IN BUILDING				
WOOD STEPS WITHOUT SHIELDS				WOOD SCRAP PILED UNDER BUILDING				
WOOD SIDING IN CONTACT WITH SOIL				LOOSE WIRE IN CONTACT WITH SOIL				
PIPES IN CONTACT WITH SOIL AND WOOD				OTHER (Specify)				
NO SHIELDS ON FOUNDATION								
FAULTY TERMITE SHIELD								
II. LOCATION OF INFESTATIONS								
FOUNDATION TIMBERS				BASE BOARDS				
WOOD PILLARS				DOOR FRAMES				
SILLS				WINDOW FRAMES				
CROSS BEAMS				STEPS				
FURNITURE				ROOF				
FLOOR JOIST				OTHER (Specify)				
FLOOR								
STUDS								
III. TYPE OF TERMITE			IV. TYPE OF FUNGI			V. DAMAGE		
	SUBTER-RANEAN		NONSUBTER-RANEAN		WOOD DECAY		WOOD STAINING	
							STRUCTURAL WEAKENING	
							SUPERFICIAL	
							ESTIMATED COST	
VI. REPAIR AND TREATMENT								
TYPE			RECM	ACCOMP	TYPE		RECM	ACCOMP
REMOVAL OF WOOD FROM SOIL CONTACT					REPAIR OF TERMITE SHIELDS			
SEALING CRACKS IN CONCRETE					REMOVAL OF CONCRETE FORMS			
POINTING UP POOR MORTAR					REMOVAL OF VINES AND SHRUBS			
LOWERING GRADE LEVEL					REMOVAL OF WOOD TRASH			
CAPPING CONCRETE FOUNDATION					OTHER (Specify)			
IMPROVING DRAINAGE UNDER BUILDING								
IMPROVING VENTILATION UNDER BUILDING								
VII. CHEMICAL CONTROL								
APPLICATION OF POISON DUST TO SHELTER TUBES <input type="checkbox"/> YES <input type="checkbox"/> NO				CHEMICAL USED				
SOIL POISON <input type="checkbox"/> YES <input type="checkbox"/> NO				TRENCH DEPTH	LINEAR FEET	CHEMICAL USED		
REPLACEMENT OF DAMAGED WOOD <input type="checkbox"/> YES <input type="checkbox"/> NO	NO. OF M BD FEET REPLACED	UNTREATED		DIPPED	SOAKED	SPRAYED	PRESSURE TREATED	
DRILLING AND FLOODING TREATMENTS <input type="checkbox"/> YES <input type="checkbox"/> NO				CHEMICAL USED				
WOOD INJECTION FOR DRY WOOD TERMITE <input type="checkbox"/> YES <input type="checkbox"/> NO				CHEMICAL USED				
VIII. COST								
LABOR		MATERIAL		OTHER		TOTAL		
IX. TREATMENT EFFECTIVENESS								
DATE	REMARKS					INSPECTOR		
DATE	REMARKS					INSPECTOR		
DATE	REMARKS					INSPECTOR		
DATE	TITLE OF INDIVIDUAL AFFECTING REPAIR AND TREATMENT			SIGNATURE				