



City of Dallas

PROTECTION AGAINST TERMITES

ADDRESS: PERMIT NUMBER:

BUILDER:

I certify that the above referenced address meets the minimum requirements for protection against termites as set forth in Section R318 PROTECTION AGAINST SUBTERRANEAN TERMITES of the 2015 International Residential Code; that the treatment was performed in compliance with the regulations of the Structural Pest Control Board of Texas; and the concentration, rate of application and method of treatment of the chemical termiticide was in strict accordance with the termiticide label.

PROTECTION PROVIDER INFORMATION

COMPANY NAME	NAME OF TECHNICIAN
--------------	--------------------

COMPANY ADDRESS

CITY	STATE	ZIP CODE
------	-------	----------

TREATMENT TYPE (CHECK ONE)

- Chemical termiticide treatment
- Termite baiting system installed in accordance with the label
- Naturally durable termite-resistant wood
- Physical barriers in accordance with Section R318.3 and used in locations as specified in Section R317.1
- Cold-formed steel framing in accordance with Section R505.2.1 and R603.2.1

§ State of Texas
§ County of _____

Before me, _____, on this day personally appeared _____, known to me to be the person whose name is subscribed to the foregoing instrument and acknowledged to me that he executed the same for the purposes and consideration therein expressed.

Given under my hand and seal of office this ____ day of _____ 201__.

NOTARY PUBLIC'S SIGNATURE