



Development Services Department

320 E Jefferson Blvd, Dallas TX 75203
(214) 948-4480

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	Email	
CITY	STATE	ZIP CODE
TREATMENT TYPE (CHECK ONE)		
<input type="checkbox"/> Chemical termiticide treatment <input type="checkbox"/> Termite baiting system installed in accordance with the label <input type="checkbox"/> Naturally durable termite-resistant wood <input type="checkbox"/> Physical barriers in accordance with Section R318.3 and used in locations as specified in Section R317.1 <input type="checkbox"/> Cold-formed steel framing in accordance with Section R505.2.1 and R603.2.1		

I, _____ have read the above information.
Please Print

Signature _____

Date: _____