

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			WOOD MEMBERS SET IN CONCRETE FLOOR			POOR VENTILATION UNDER BUILDING		
FORM BOARDS LEFT IN CONCRETE			WOOD STEPS IN CONTACT WITH SOIL			WATER COLLECTIONS UNDER BUILDING		
WOOD MEMBERS SET IN CONCRETE FLOOR			WOOD STEPS WITHOUT SHIELDS			VINES AND SHRUBS AGAINST BUILDING		
WOOD STEPS IN CONTACT WITH SOIL			WOOD SIDING IN CONTACT WITH SOIL			LEAKY PLUMBING IN BUILDING		
WOOD STEPS WITHOUT SHIELDS			PIPES IN CONTACT WITH SOIL AND WOOD			WOOD SCRAP PILED UNDER BUILDING		
WOOD SIDING IN CONTACT WITH SOIL			NO SHIELDS ON FOUNDATION			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			WOOD PILLARS			BASE BOARDS		
WOOD PILLARS			SILLS			DOOR FRAMES		
SILLS			CROSS BEAMS			WINDOW FRAMES		
CROSS BEAMS			FURNITURE			STEPS		
FURNITURE			FLOOR JOIST			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				CHEMICAL USED				
<input type="checkbox"/> YES <input type="checkbox"/> NO								
SOIL POISONING				TRENCH DEPTH	LINEAR FEET	CHEMICAL USED		
<input type="checkbox"/> YES <input type="checkbox"/> NO								
REPLACEMENT OF DAMAGED WOOD		NO. OF M BD FEET REPLACED	UNTREATED	DIPPED	SOAKED	SPRAYED	PRESSURE TREATED	
<input type="checkbox"/> YES <input type="checkbox"/> NO								
DRILLING AND FLOODING TREATMENTS				CHEMICAL USED				
<input type="checkbox"/> YES <input type="checkbox"/> NO								
WOOD INJECTION FOR DRY WOOD TERMITE				CHEMICAL USED				
<input type="checkbox"/> YES <input type="checkbox"/> NO								
VIII. COST								
LABOR		MATERIAL			OTHER		TOTAL	
IX. TREATMENT EFFECTIVENESS								
DATE	REMARKS					INSPECTOR		
DATE	REMARKS					INSPECTOR		
DATE	REMARKS					INSPECTOR		
DATE	TITLE OF INDIVIDUAL EFFECTING REPAIR AND TREATMENT				SIGNATURE			