

WOOD DESTROYING PESTS AND ORGANISMS INSPECTION REPORT

Building No 4600	Street El Caminito Road	City Shingle Springs	Zip 95682	Date of Inspection 05/07/2026	Current Page 2/6
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WHAT IS A WOOD DESTROYING PEST & ORGANISM INSPECTION REPORT? READ THIS DOCUMENT. IT EXPLAINS THE SCOPE AND LIMITATIONS OF A STRUCTURAL PEST CONTROL INSPECTION AND A WOOD DESTROYING PEST & ORGANISM INSPECTION REPORT.

A WOOD DESTROYING PEST & ORGANISM INSPECTION REPORT CONTAINS FINDINGS AS TO THE PRESENCE OR ABSENCE OF EVIDENCE OF WOOD DESTROYING ORGANISMS IN VISIBLE AND ACCESSIBLE AREAS AND CONTAINS RECOMMENDATIONS FOR CORRECTING ANY INFESTATIONS OR INFECTIONS FOUND. THE CONTENTS OF WOOD DESTROYING PEST & ORGANISM INSPECTION REPORTS ARE GOVERNED BY THE STRUCTURAL PEST CONTROL ACT AND REGULATIONS.

SOME STRUCTURES DO NOT COMPLY WITH BUILDING CODE REQUIREMENTS OR MAY HAVE STRUCTURAL, PLUMBING, ELECTRICAL, MECHANICAL, HEATING, AIR CONDITIONING OR OTHER DEFECTS THAT DO NOT PERTAIN TO WOOD DESTROYING ORGANISMS. A WOOD DESTROYING PEST & ORGANISM INSPECTION REPORT DOES NOT CONTAIN INFORMATION ON SUCH DEFECTS, IF ANY, AS THEY ARE NOT WITHIN THE SCOPE OF THE LICENSES OF EITHER THIS COMPANY, OR ITS EMPLOYEES.

THE EXTERIOR SURFACE OF THE ROOF WAS NOT INSPECTED. IF YOU WANT THE WATER TIGHTNESS OF THE ROOF DETERMINED, YOU SHOULD CONTACT A ROOFING CONTRACTOR WHO IS LICENSED BY THE CONTRACTORS STATE LICENSE BOARD. AN INSPECTION IS PERFORMED FROM THE GROUND LEVEL ONLY TO VISIBLE AND ACCESSIBLE AREAS.

THIS COMPANY DOES NOT CERTIFY OR GUARANTEE AGAINST ANY LEAKAGE, SUCH AS (BUT NOT LIMITED TO) PLUMBING, APPLIANCES, WALLS, DOORS, WINDOWS, ANY TYPE OF SEEPAGE, ROOF OR DECK COVERINGS. THIS COMPANY RENDERS NO GUARANTEE, WHATSOEVER, AGAINST ANY INFECTION, INFESTATION OR ANY OTHER ADVERSE CONDITION WHICH MAY EXIST IN SUCH AREAS OR MAY BECOME VISIBLY EVIDENT IN SUCH AREA AFTER THIS DATE. THIS COMPANY DOES NOT WATER TEST UPPER LEVEL SHOWER PANS DUE TO DAMAGE THAT MAY OCCUR FROM SUCH LEAKAGE TO THE CEILING BELOW. UPON REQUEST, FURTHER INSPECTION OF THESE AREAS WOULD BE PERFORMED AT AN ADDITIONAL CHARGE.

IN THE EVENT DAMAGE OR INFESTATION DESCRIBED HEREIN IS LATER FOUND TO EXTEND FURTHER THAN ANTICIPATED, ALL WORK WILL CEASE AND A SUPPLEMENTAL REPORT WILL BE ISSUED. OWNER SHOULD BE AWARE OF THIS OPEN BID WHEN CONTRACTING WITH OTHERS OR UNDERTAKING THE WORK HIMSELF/HERSELF.

ALL PESTICIDES AND FUNGICIDES MUST BE APPLIED BY A STATE CERTIFIED APPLICATOR (SEC.8555 BUSINESS AND PROFESSIONS CODE DIVISION 3) AND IN ACCORDANCE WITH THE MANUFACTURERS LABEL REQUIREMENTS.

*****NOTICE: REPORTS ON THIS STRUCTURE PREPARED BY VARIOUS REGISTERED COMPANIES SHOULD LIST THE SAME FINDINGS (I.E. TERMITE INFESTATIONS, TERMITE DAMAGE, FUNGUS DAMAGE, ETC.), HOWEVER, RECOMMENDATIONS TO CORRECT THESE FINDINGS MAY VARY FROM COMPANY TO COMPANY. YOU HAVE A RIGHT TO SEEK A SECOND OPINION FROM ANOTHER COMPANY.****

THE WOOD DESTROYING PEST & ORGANISMS REPORT DOES NOT INCLUDE MOLD OR ANY MOLD LIKE CONDITIONS. NO REFERENCE WILL BE MADE TO MOLD OR MOLD-LIKE CONDITIONS. MOLD IS NOT A WOOD DESTROYING ORGANISM AND IS OUTSIDE THE SCOPE OF THIS REPORT AS DEFINED BY THE STRUCTURAL PEST CONTROL ACT. IF YOU WISH YOUR PROPERTY TO BE INSPECTED FOR MOLD OR MOLD LIKE CONDITIONS, PLEASE CONTACT A CERTIFIED INDUSTRIAL HYGIENIST.

THERE MAY BE HEALTH RELATED ISSUES ASSOCIATED WITH THE FINDINGS REFLECTED IN THIS REPORT. WE ARE NOT QUALIFIED TO AND DO NOT RENDER AN OPINION CONCERNING ANY SUCH HEALTH ISSUES. THE INSPECTION REFLECTED BY THIS REPORT WAS LIMITED TO THE VISIBLE AND ACCESSIBLE AREAS ONLY. QUESTIONS CONCERNING HEALTH RELATED ISSUES, WHICH MAY BE ASSOCIATED WITH THE FINDINGS OR RECOMMENDATIONS REFLECTED IN THIS REPORT SHOULD BE DIRECTED TO A CERTIFIED INDUSTRIAL HYGIENIST.

WARNING: EFFECTIVE APRIL 22ND, 2010: IT IS MANDATORY THAT ANY AND ALL PERSONS THAT PERFORM REPAIRS, RENOVATION OR PAINTING MUST ADHERE TO THE NEW EPA REGULATION DETAILED IN 40 CFR 745, SUBPART E. THE REGULATION IS APPLICABLE TO ALL RESIDENTIAL HOUSES, APARTMENTS AND CHILD CARE FACILITIES BUILT PRIOR TO 1978. ALL TRADESPERSONS AND/OR PERSONS WORKING ON A PROPERTY WITH AN INTENT TO SELL MUST SUPPLY THE OWNER AND/OR INTERESTED PARTY THE DESIGNATED EPA PAMPHLET "RENOVATE RIGHT" LEAD HAZARD INFORMATION PAMPHLET. THE EPA REGULATION STIPULATES THAT IF MORETHAN 6 SQUARE FEET OF PAINT ON INTERIOR SURFACES OR MORE THAN

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(SECTION 1 ITEM)

(3) FUNGUS / DRYROT

3D. FINDING: THERE IS WOOD DECAY FUNGI (DRY ROT) DAMAGE AT THE V-RUSTIC ROOF SHEATHING .

RECOMMENDATION: REMOVE ALL DAMAGED WOOD AND REPLACE WITH NEW MATERIAL. APPLY TIMBOR (ACTIVE INGREDIENT, DISODIUM OCTABORATE TETRAHYDRATE) TO THE ADJACENT INFECTED AREAS AS NECESSARY FOR THE CONTROL OF WOOD DECAY FUNGI (DRY ROT).

(SECTION 1 ITEM)

(3) FUNGUS / DRYROT

3E. FINDING: THERE IS WOOD DECAY FUNGI (DRY ROT) DAMAGE AT THE JOIST .

RECOMMENDATION: REMOVE DAMAGED WOOD AND REPAIR/FILL AS NECESSARY. APPLY TIMBOR (ACTIVE INGREDIENT, DISODIUM OCTABORATE TETRAHYDRATE) TO THE ADJACENT INFECTED AREAS AS NECESSARY FOR THE CONTROL OF WOOD DECAY FUNGI (DRY ROT).

(SECTION 1 ITEM)

(3) FUNGUS / DRYROT

3F. FINDING: THERE IS WOOD DECAY FUNGI (DRY ROT) DAMAGE AT THE FASCIA .

RECOMMENDATION: REMOVE ALL DAMAGED WOOD AND REPLACE WITH NEW MATERIAL. APPLY TIMBOR (ACTIVE INGREDIENT, DISODIUM OCTABORATE TETRAHYDRATE) TO THE ADJACENT INFECTED AREAS AS NECESSARY FOR THE CONTROL OF WOOD DECAY FUNGI (DRY ROT).

(SECTION 2 ITEM)

(4) OTHER FINDINGS

4A. FINDING: THE COMMODE IN THE HALL BATHROOM IS LOOSE.

RECOMMENDATION: RESET COMMODE USING A NEW WAX SEAL.

(SECTION 2 ITEM)

(4) OTHER FINDINGS

4B. FINDING: CELLULOSE DEBRIS IS SCATTERED THROUGHOUT THE SUBAREA. EMBEDDED FORM BOARDS AND/OR STAKES ARE ALSO VISIBLE. THIS CONDITION IS CONDUCIVE TO AN INFESTATION OF WOOD-DESTROYING ORGANISMS.

RECOMMENDATION: REMOVE AND DISPOSE OF ALL LOOSE WOOD SCRAPS AND OTHER CELLULOSE DEBRIS OF RAKEABLE SIZE OR LARGER. REMOVE EMBEDDED FORM BOARDS AND/OR STAKES, OR TREAT SAME WITH TIMBOR (ACTIVE INGREDIENT: SODIUM OCTOBORATE) IF REMOVAL IS IMPRACTICAL.

Additional Notes

NOTES: AREAS ABOVE 10 FEET FROM GROUND LEVEL WERE VISUALLY INSPECTED ONLY. TWIN HOME SERVICES ASSUMES NO LIABILITY FOR CONDITIONS NOT VISIBLY EVIDENT FROM

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GROUND LEVEL.

Additional Notes

NOTES: THERE ARE MINOR CRACKS IN THE EXTERIOR STUCCO SIDING. PERIODIC INSPECTIONS ARE ADVISED.

Additional Notes

NOTES: NO CLAIMS ARE EXPRESSED CONCERNING THE WATERTIGHT INTEGRITY OF THE SKYLIGHTS DUE TO THE TYPE OF MATERIAL.

Additional Notes

NOTES: TREES WERE NOTED TO BE HITTING THE STRUCTURE. AS A PART OF NORMAL OWNER MAINTENANCE, THE TREES SHOULD BE KEPT CUT BACK OFF THE STRUCTURE.

Additional Notes

NOTES: AT THE TIME OF THIS INSPECTION, THE HOME WAS FURNISHED AND/OR OCCUPIED, MAKING AREAS OF THE INTERIOR INACCESSIBLE FOR INSPECTION. TWIN TERMITE RENDERS NO OPINION AND ASSUMES NO LIABILITY FOR AREAS NOT ACCESSIBLE DURING THE INSPECTION.

Additional Notes

NOTES: 30% OF THE SUBAREA WAS INACCESSIBLE FOR INSPECTION AND/OR VISUALLY INSPECTED DUE TO PLUMBING/DUCTING AND LACK OF CLEARANCE; NO CLAIMS ARE EXPRESSED REGARDING CONDITIONS IN THESE AREAS.

STATE LAW REQUIRES THAT YOU BE GIVEN THE FOLLOWING INFORMATION:

CAUTION: PESTICIDES ARE TOXIC CHEMICALS. STRUCTURAL PEST CONTROL COMPANIES ARE REGISTERED AND REGULATED BY THE STRUCTURAL PEST CONTROL BOARD, AND APPLY PESTICIDES WHICH ARE REGISTERED AND APPROVED FOR USE BY THE CALIFORNIA DEPARTMENT OF PESTICIDE REGULATION AND THE UNITED STATES ENVIRONMENTAL PROTECTION AGENCY. REGISTRATION IS GRANTED WHEN THE STATE FINDS THAT, BASED ON EXISTING SCIENTIFIC EVIDENCE, THERE ARE NO APPRECIABLE RISKS IF PROPER USE CONDITIONS ARE FOLLOWED OR THAT THE RISKS ARE OUTWEIGHED BY THE BENEFITS. THE DEGREE OF RISK DEPENDS UPON THE DEGREE OF EXPOSURE, SO EXPOSURE SHOULD BE MINIMIZED.

IF WITHIN TWENTY FOUR (24) HOURS FOLLOWING APPLICATION, YOU EXPERIENCE SYMPTOMS SIMILAR TO COMMON SEASONAL ILLNESS COMPARABLE TO THE FLU, CONTACT YOUR PHYSICIAN OR POISON CONTROL CENTER (1-800-876-4766) AND YOUR PEST CONTROL COMPANY IMMEDIATELY. (916-344-8946)

FURTHER INFORMATION: CONTACT ANY OF THE FOLLOWING: YOUR TERMITE AND PEST CONTROL COMPANY, TWIN TERMITE PEST CONTROL AND CONSTRUCTION, INC., (916-344-8946); FOR HEALTH QUESTIONS--THE SACRAMENTO COUNTY HEALTH DEPARTMENT (916-875-8440), EL DORADO COUNTY ENVIRONMENTAL MANAGEMENT DEPARTMENT (530-621-5300), PLACER COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH (530-889-7372), SAN JOAQUIN ENVIRONMENTAL HEALTH DEPARTMENT (209-468-3420), SOLANO COUNTY ENVIRONMENTAL HEALTH SERVICES DIVISION (707-421-6765), SUTTER COUNTY ENVIRONMENTAL HEALTH DIVISION (530-822-7327), YOLO COUNTY ENVIRONMENTAL HEALTH DIVISION (530-666-8646), YUBA COUNTY ENVIRONMENTAL HEALTH DEPARTMENT (530-741-6251), AMADOR COUNTY ENVIRONMENTAL HEALTH DEPARTMENT (209-223-6439), SAN DIEGO DEPARTMENT OF ENVIRONMENTAL HEALTH (858-505-6700), COUNTY OF LOS ANGELES DEPARTMENT OF PUBLIC HEALTH (888-700-9995), VENTURA COUNTY ENVIRONMENTAL HEALTH DIVISION (805-654-2813),

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ORANGE COUNTY ENVIRONMENTAL HEALTH DIVISION (714-433-6000), SANTA BARBARA ENVIRONMENTAL HEALTH SERVICES (805-681-4900); FOR APPLICATION INFORMATION-- THE SACRAMENTO COUNTY AGRICULTURAL COMMISSIONER (916-875-6603), EL DORADO COUNTY AGRICULTURE COMMISSION (530-621-5520), PLACER COUNTY AGRICULTURE COMMISSION (530-823-1698), SAN JOAQUIN COUNTY AGRICULTURE COMMISSION (209-468-3300), SOLANO COUNTY AGRICULTURE COMMISSION (707-421-7465), SUTTER COUNTY AGRICULTURE COMMISSION (530-822-7500), YOLO COUNTY AGRICULTURE COMMISSION (530-666-8140), YUBA COUNTY AGRICULTURE COMMISSION (530-749-5400), AMADOR COUNTY AGRICULTURE COMMISSION (209-223-6487), SAN DIEGO AGRICULTURE WEIGHTS AND MEASURES (858-694-2739), LOS ANGELES AGRICULTURAL COMMISSIONER (626-575-5471), COUNTY OF VENTURA AGRICULTURAL COMMISSIONER (805-654-5000), COUNTY OF SANTA BARBARA AGRICULTURAL COMMISSIONER (805-681-5600), ORANGE COUNTY AGRICULTURE COMMISSION (714-955-0100); AND FOR REGULATORY INFORMATION--THE STRUCTURAL PEST CONTROL BOARD, (800-737-8188) 2005 EVERGREEN STREET, SUITE 1500, SACRAMENTO, CA, 95815.

THANK YOU FOR SELECTING TWIN HOME SERVICES TO PERFORM A STRUCTURAL PEST CONTROL INSPECTION ON YOUR PROPERTY. WE LOOK FORWARD TO WORKING WITH YOU IN ANY REPAIR WORK OR TREATMENTS THAT MAY BE NECESSARY.

FOR TWIN HOME SERVICES TO PERFORM REPAIRS, PLEASE SEE ATTACHED WORK AUTHORIZATION CONTRACT. THE ESTIMATES FOR REPAIRS INCLUDES ONE (1) COAT OF PRIMER PAINTING OF NEW EXTERIOR WOOD MEMBERS (IN THE EVENT THAT PRE-PRIMED WOOD IS NOT USED), WEATHER PERMITTING. UNLESS OTHERWISE NOTED, FINISH PAINTING IS NOT INCLUDED IN ESTIMATE. NO LIABILITY CAN BE ASSUMED FOR DAMAGE TO PERSONAL PROPERTY/WALL HANGINGS ON THE INTERIOR DURING EXTERIOR REPAIRS. TWIN HOME SERVICES DOES NO TEXTURING OR WALL PAPERING UNLESS OTHERWISE NOTED IN REPORT. NEW LINOLEUM WILL BE NEUTRAL IN COLOR. IF DESIRED PARTIES WANT TO UPGRADE THE FLOOR COVERING, THERE WILL BE AN ADDITIONAL CHARGE. IF A BUILDING PERMIT IS REQUIRED TO COMPLETE THE WORK CONTRACTED, THE FEES WILL BE ADDED TO THE FINAL BILLING INVOICE. IF THERE ARE ANY ADDITIONAL REQUIREMENTS BY CITY OR COUNTY, THE OWNER OR OWNERS AGENT WILL BE CONTACTED FOR FURTHER DIRECTION. THERE WILL BE NO CHARGE FOR A REINSPECTION IF TWIN HOME SERVICES IS CONTRACTED TO MAKE THE REPAIRS.

THIS COMPANY WILL REINSPECT REPAIRS DONE BY OTHERS WITHIN FOUR (4) MONTHS OF THE ORIGINAL INSPECTION. A CHARGE CAN BE NO GREATER THAN THE ORIGINAL INSPECTION FEE FOR EACH REINSPECTION. THE REINSPECTION MUST BE DONE WITHIN TEN (10) WORKING DAYS OF REQUEST. THE REINSPECTION IS A VISUAL INSPECTION AND IF INSPECTION OF CONCEALED AREAS IS DESIRED, INSPECTION OF WORK IN PROGRESS WILL BE NECESSARY. ANY GUARANTEES MUST BE RECEIVED FROM PARTIES PERFORMING REPAIRS. THERE WILL BE NO GUARANTEE GIVEN BY TWIN HOME SERVICES ON WORK DONE BY OTHERS.

ALL WORK PERFORMED BY TWIN HOME SERVICES IS GUARANTEED FOR ONE (1) YEAR WITH THE EXCEPTION OF CAULKING AND SEALING WHICH IS GUARANTEED FOR THIRTY (30) DAYS, AND PLUMBING WHICH IS GUARANTEED FOR NINETY (90) DAYS, UNLESS OTHERWISE SPECIFIED IN THIS REPORT.

WORK AUTHORIZATION CONTRACT

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		Twin Termite and Pest Control 530A 6th Street , Roseville , CA 95678 PHONE: (916) 344-8946 FAX: (916) 344-8942 www.twintermite.com		Report # 101516	

ITEMIZED COST BREAKDOWN (Refer to items on the report)

		Primary Work Bid	Secondary Work Bid
SECTION 1:	3A:	\$300.00	NONE
	3B:	\$135.00	NONE
	3C:	\$1281.00	NONE
	3D:	\$4351.00	NONE
	3E:	\$165.00	NONE
	3F:	\$210.00	NONE
	Section 1 Total:	\$6,442.00	\$0.00
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SECTION 2:	4A:	\$150.00	NONE
	4B:	\$152.00	NONE
	Section 2 Total:	\$302.00	\$0.00
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FURTHER INSPECTION:		NONE	NONE
	Further Inspection Total:	\$0.00	\$0.00
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	Total:	\$6,744.00	

THIS IS A BINDING CONTRACT between our company and the signing party below, and incorporates our termite report #101516 dated 05/07/2026 for real property located at Shingle Springs CA 95682.

Items on the report may contain provisions for additional costs over and above the original estimate. Please read the report carefully and completely.

CONDITIONS:

1. This offer is limited to 4 months from the date of the report.
2. If further inspection is recommended, or if additional work is required, we will provide prices or recommendations for correction. All treatments have a one (1) year guarantee unless otherwise indicated in the report or if an Extended Termite Protection Service has been purchased for additional years. The estimates for repairs include one (1) coat of primer painting of new exterior wood members, in the event that pre-primed wood is not used, weather permitting.
3. Notice to owner of Mechanic's Lien as required by the Structural Pest Control Board: Under the California Mechanics Lien Law, any structural pest control operator who contracts to do work for you, any contractor, subcontractor, laborer, supplier or other person who helps to improve your property, but is not paid for his work or supplies, has a right to enforce a claim against

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your property. This means that after a court hearing, your property could be sold by a court officer and the proceeds of the sale used to satisfy the indebtedness. This can happen even if you have paid your contractor in full if the subcontractor, laborers or suppliers remain unpaid. To preserve their right to file a claim or lien against your property, certain claimants such as subcontractors or material suppliers are required to provide you with a document entitled "Preliminary Notice". General contractors and laborers for wages do not have to provide this notice. A Preliminary Notice is not a lien against your property. Its purpose is to notify you of persons who may have a right to file a lien against your property if they are not paid.

4. ATTORNEY FEES: The prevailing party shall have the right to collect from the other party its reasonable costs and necessary disbursements and attorneys' fees incurred in enforcing this Agreement.

5. Twin will use due caution and diligence in our operations and care will always be taken to minimize any damage, but assumes no responsibility for matching existing colors and styles, or for incidental damage to roof coverings, TV antennas, solar panels, rain gutters, plant life, paint or wall coverings. We are not responsible for personal property. There may be health related issues associated with the structural repairs reflected in the inspection report referenced by this work authorization contract. These health issues include but are not limited to the possible release of mold spores during the course of repairs. We are not qualified to and do not render any opinion concerning such health issues or any special precautions. Any questions concerning health issues or any special precautions to be taken prior to or during the course of such repairs should be directed to a Certified Industrial Hygienist before any such repairs are undertaken. By executing this work authorization contract, customer acknowledges that he or she has been advised of the foregoing and has had the opportunity to consult with a qualified professional.

6. This report is limited to the accessible areas of the structure shown on the diagram. Please refer to the report for areas not inspected and further information.

7. TERMS OF PAYMENT (please choose an option below as applicable).

Twin Home Services requires a backup payment method to be placed on file to secure the appointment, regardless of the billing option chosen below. Please read through all terms carefully regarding payment requirements. **In the event that a credit or debit card is charged for repairs, there is a 3% Surcharge Processing Fee.** This fee does not apply if we receive a check from escrow or from the client. This fee does not apply when an eCheck used for payment.


If the amount of the total job exceeds \$3,500.00, regardless of invoicing through escrow or to the client directly, a required 10% deposit plus a 3% Surcharge if using a Credit Card will be charged on the day the job begins to the backup payment method provided. The 10% deposit can be refunded upon receipt of the full amount from escrow. If escrow pays the remaining balance only, the 10% deposit will not be refunded. The 3% processing fee for credit or debit card payment is not refundable.

We agree to pay the sum of _____ upon completion of repairs. Note: The card provided as backup can be charged upon completion of the work or shredded upon collection of a check at the property. Please indicate preference with the office when scheduling. **Credit and/or debit cards are subject to a 3% Surcharge Processing Fee.** There is no additional fee for payment by eCheck or collection of payment on-site.

We instruct _____, holder of escrow number _____
to pay the sum of _____ upon close of escrow. **Close of escrow date:** _____
(*must close within 30 days of completion*)

Phone _____, Escrow Officer _____ Email _____

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8. We authorize this company to perform items:

for a contract price of _____ (Job minimum is \$350.00).

HOME IS VACANT OR OCCUPIED: _____

NAME OF PERSON TO CONTACT FOR ACCESS: _____ PHONE # _____

GATE CODE: _____ | ALARM CODE: _____ | COMBO LOCKBOX CODE: _____

9. We authorize finish painting to be performed for an additional cost (Select Option Below): Owner/Seller encouraged to supply the paint.

Yes, please finish paint the repaired areas for \$85.00/hour. Paint will be located on-site
at: _____.

OR

No, finish painting at an additional cost is not requested.

We understand that we are responsible for payment, and if escrow does not close within 30 days of completion of work we will be charged the amount due in full. If payment method is not approved, late fees may apply.

SIGNED _____ (Owner or Owner's Agent) DATE _____

Owner Name (Please Print) _____

Owner Mailing Address (Please Print) _____

It is assumed that if an agent orders work on the owner's behalf, and that they were notified prior by said agent, that if payment is not made by the agent or escrow company it will be the responsibility of the owner to produce payment. The credit card to be used as a backup can be called into the office or filled out below and faxed/emailed into service@twinhomeservices.com.


Please choose option 1 or option 2:

1. () This card is intended for back-up purposes only and will be charged if invoice is over 30 days past completion date, I will pay via:

Please Mark One: () Check or () eCheck or () Escrow

OR

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2. () This card is to be charged upon completion of the repairs, I understand there is a 3% Surcharge Processing Fee.

NAME ON CARD _____ PHONE # _____ CARD TYPE _____

CARD NUMBER _____ EXPIRATION DATE: _____

SECURITY CODE: _____ BILLING ADDRESS: _____

COMPANY: _____