

CITY OF SACRAMENTO

Permit No: 9806439

1231 I Street, Sacramento, CA 95814

Insp Area: 1

Site Address: 935 VANDERBILT WY SAC

Sub-Type: RES

Parcel No: 2950070030

Housing (Y/N): N

CONTRACTOR

OWNER

ARCHITECT

LEVINE ARNOLD/MAXINE
935 VANDERBILT WY
SACRAMENTO CA 95825

Nature of Work: BUSTER / TERMITE REPAIR WITH OUT PERMIT, QUAD FEE

CONSTRUCTION LENDING AGENCY : I hereby affirm under penalty of perjury that there is a construction lending agency for the performance of the work for which this permit is issued (Sec. 3097, Civ. C).

Lender's Name Lender's Address

LICENSED CONTRACTORS DECLARATION: I hereby affirm under penalty of perjury that I am licensed under provisions of Chapter 9 (commencing with section 7000) of Division 3 of the Business and Professions Code and my license is in full force and effect.

License Class License Number Date Contractor Signature

OWNER-BUILDER DECLARATION: I hereby affirm under penalty of perjury that I am exempt from the contractors License Law for the following reason (Sec. 7031.5, Business and Professions Code; any city or county which requires a permit to construct, alter, improve, demolish, or repair any structure, prior to its issuance, also requires the applicant for such permit to file a signed statement that he or she is licensed pursuant to the provisions of the Contractors License Law (Chapter 9 (commencing with Section 7000) of Division 8 of the Business and Professions Code) or that he or she is exempt therefrom and the basis for the alleged exemption. Any violation of Section 7031.5 by any applicant for a permit subjects the applicant to a civil penalty of not more than five hundred dollars (\$500.00);

I, as a owner of the property, or my employees with wages as their sole compensation, will do the work, and the structure is not intended or offered for sale (Sec. 7044, Business and Professional Code: The Contractors License Law does not apply to an owner of property who builds or improves thereon, and who does such work himself or herself or through his/her own employees, provided that such improvements are not intended or offered for sale. If, however, the building or improvement is sold within one year of completion, the owner-builder will have the burden of proving that he/she did not build or improve for the purpose of sale.)

X I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Sec. 7044, Business and Professions Code: The Contractors License Law does not apply to an owner of property who builds or improves thereon, and who contracts for such projects with a contractor(s) licensed pursuant to the Contractors License Law).

I am exempt under Sec. B & PC for this reason:

Date JULY 15 98 Owner Signature [Signature]

IN ISSUING THIS BUILDING PERMIT, the applicant represents, and the city relies on the representation of the applicant, that the applicant verified all measurements and locations shown on the application or accompanying drawings and that the improvement to be constructed does not violate any law or private agreement relating to permissible or prohibited locations for such improvements. This building permit does not authorize any illegal location of any improvement or the violation of any private agreement relating to location of improvements.

I certify that I have read this application and state that all information is correct. I agree to comply with all city and county ordinances and state laws relating to building construction and hereby authorize representative(s) of this city to enter upon the abovementioned property for inspection purposes.

Date JULY 15 98 Applicant/Agent Signature [Signature]

WORKER'S COMPENSATION DECLARATION: I hereby affirm under penalty of perjury one of the following declarations:

I have and will maintain a certificate of consent to self-insure for workers' compensation as provided for by Section 3700 of the Labor Code, for the performance of work for which the permit is issued.

I have and will maintain workers' compensation insurance, as required by Section 3700 of the Labor Code, for the performance of the work for which this permit is issued. My workers' compensation insurance carrier and policy number are:

Carrier Policy Number

X (This section need not be completed if the permit is for \$100 or less) I certify that in the performance of the work for which this permit is issued, I shall not employ any person in any manner so as to become subject to the workers' compensation laws of California and agree that if I should become subject to the workers' compensation provisions of Section 3700 of the Labor Code, I shall forthwith comply with those provisions.

Date JULY 15 98 Applicant Signature [Signature]

WARNING: FAILURE TO SECURE WORKER'S COMPENSATION COVERAGE IS UNLAWFUL AND SHALL SUBJECT AN EMPLOYER TO CRIMINAL PENALTIES AND CIVIL FINES UP TO ONE HUNDRED THOUSAND DOLLARS (\$100,000) IN ADDITION TO THE COST OF COMPENSATION, DAMAGES AS PROVIDED FOR IN SECTION 3706 OF THE LABOR CODE, INTEREST AND ATTORNEY'S FEE.

THIS PERMIT SHALL EXPIRE BY LIMITATION IF WORK IS NOT COMMENCED WITHIN 180 DAYS.

OWNER-BUILDER VERIFICATION

ATTENTION PROPERTY OWNER

An owner-builder building permit has been applied for in your name and bearing your signature.

Please complete and return this information in the envelope provided at your earliest opportunity to avoid unnecessary delay in processing and issuing your building permit. No building permit will be issued until this verification is received.

1. I personally plan to provide the major labor and materials for construction of the proposed improvement (yes or no) NO

2. I (have/have not) HAVE signed an application for a building permit for the proposed work.

3. I have contracted with the following person (firm) to provide the proposed construction:

Name Alan Benbow Address 4501 KIPPING DR
City CARMICHAEL Telephone 973-0662
Contractors License No. 480482

4. I plan to provide portions of the work, but I have hired the following person to coordinate, supervise, and provide the major work.

~~Name _____ Address _____
City _____ Telephone _____
Contractors License No. _____~~

5. I will provide some of the work but I have contracted (hired) the following to provide the work indicated:

Name	Address	Phone	Type of Work

Signed [Signature]

Job Address 935 VANDERBILT WAY Date JULY 14, 98

Permit No.: _____

DON DUNFORD

ATTACHED PER YOUR REQUEST IS
A COPY OF THE SIGNED AND CLEARED PEST
CONTROL REPORT ISSUED BY MARATHON.

ALSO PER YOUR REQUEST ARE PHOTOS TAKEN
ON TUESDAY AUG 4 OF THE TREATMENT TO THE
THREE PATIO COVER COLUMNS.

I HOPE THIS WILL BE SUFFICIENT TO
RE-CLEAR THE PERMIT AND THE CORRECTION NOTICE
ISSUED BY ~~MAY~~ MR HAY

IF THERE ARE ANY QUESTIONS PLEASE CALL ME
AT 503-672-9821, PLEASE FORWARD TO ME
SOME EVIDENCE OF CLOSURE.

MR ARNOLD T. LEVINS
3612 MARYCLAIR RD
SACRAMENTO PARK CAL
95682

P.S. SUBJECT PROPERTY LOCATED AT
935 VANDERBILT WAY
SACTO CAL 95825

JUN 11 '98 03:36PM LYON & ASSOC. SIERRA

WOOD DESTROYING PEST AND ORGANISMS INSPECTION REPORT

This is an inspection report only - not a Notice of Completion

ADDRESS OF PROPERTY INSPECTED

BUILDING NO.	STREET	CITY	ZIP	COUNTY CODE	DATE OF INSPECTION	NUMBER OF PAGES
936	VANDERBILT WY.	SACRAMENTO	95825	34	06/10/98	6

MARATHON TERMITE & PEST CONTROL

3263 MONTER CR. STE 1
 RANCHO CORDOVA, CA. 95742
 916-442-1850 FAX 916-836-8263

Affix stamp here to Board copy only

A LICENSED PEST CONTROL OPERATOR IS AN EXPERT IN HIS FIELD. ANY QUESTIONS RELATIVE TO THIS REPORT SHOULD BE REFERRED TO HIM/HER.

REGISTRATION #	REPORTS #	STAMP #	REGIONS
PR 3052	980877	1360867V	

ORDERED BY: JOE FRENCH @ LYON AND ASSOCIATES, 2800 FAIR OAKS BLVD, STE. 20, SACRAMENTO, CA 95825
 PH# 916-481-3840 * F# 916-484-7883

REPORT SENT TO: GINGER STARCHER @ COLDWELL BANKER, 410 DRAKE CR, SACRAMENTO, CA 95834

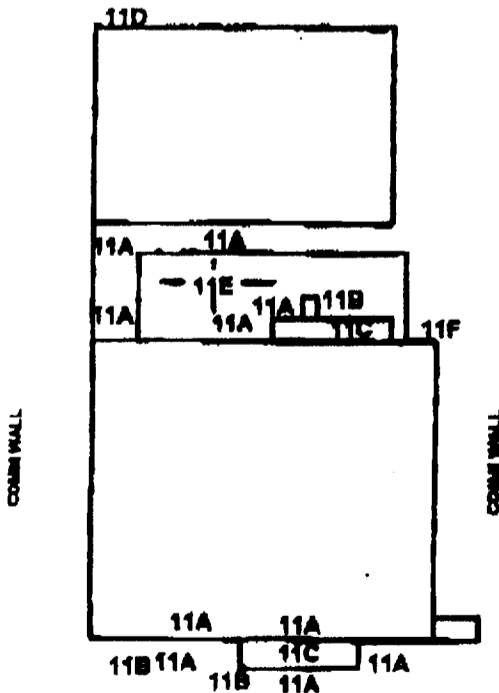
PROPERTY OWNER: ARNOLD LEVINE 239 VANDERBILT WY, SACRAMENTO, CA 95825

PARTY IN INTEREST:

ORIGINAL REPORT <input type="checkbox"/>	LIMITED REPORT <input type="checkbox"/>	SUPPLEMENTAL REPORT <input checked="" type="checkbox"/>	REINSPECTION REPORT <input type="checkbox"/>	Original Stamp # 1380505V	Date 06/15/98
GENERAL DESCRIPTION: Multi-family residence.				IN ACCESSIBLE AREAS NOT INSPECTED FUTURE INSPECTION STRUCTURAL DAMAGE BRYWOOD YERMITES FUNGUS BRIV ROD OTHER WOOD PEST BARKWOOD TERMITES OTHER WOOD DESTROYERS OTHER WOOD BORERS CROWN BORERS DRILL HOLES NUMBER OF TERMITES BY ALL SIZES	
INSPECTION TAG POSTED: Garage					
OTHER INSPECTION TAGS:					
1. SUBSTRUCTURE AREA	Slab.				
2. BATH SHOWER	No Ground Floor Shower.				
3. FOUNDATION	Slab.				
4. PORCHES - STEPS	Concrete.				
5. VENTILATION	None.				
6. ADJUSTMENTS					
7. ATTIC SPACES	Insulated.				
8. GARAGES	Detached.				
9. DECKS - PATIOS					
10. OTHER - INTERIOR					
11. OTHER - EXTERIOR				X	

DIAGRAM AND EXPLANATION OF FINDINGS (This report is limited to structure or structure shown on diagram.)

NOTE: Diagram is not to scale and findings are in approximate locations.



Inspected By MARK MATLOCK

License No. OPR 8463

Signature [Signature]

NOTE: Questions or problems concerning the above report should be directed to the manager of the company. Unresolved questions or problems with services performed may be directed to the Structural Pest Control Board at (800) 727-8168 or (916) 267-2533. You are entitled to obtain copies of all reports and completion notices on this property filed with the Board during the preceding five years upon payment of a \$ 2.00 search fee to: The Structural Pest Control Board, 1423 Howe Ave., STE 3, Sacramento, California 95825-3380.

JUN 11 '98 03:36PM LYON & ASSOC. SIERRA

P.3/5

SECOND PAGE OF STANDARD INSPECTION REPORT OF THE PROPERTY LOCATED AT:

836 VANDERBILT WY. - SACRAMENTO, CA 95833

BLDG. NO.	STREET	CITY
1300047Y	08/10/98	95837
STAMP NO.	DATE OF INSPECTION	CO. REPORT NO. (IF ANY)

NOTES, CAUTIONS, AND DISCLAIMERS AREA

THE PEST CONTROL INDUSTRY RECOGNIZES A STRUCTURE TO HAVE CERTAIN AREAS BOTH INACCESSIBLE AND NOT INSPECTED. THESE AREAS INCLUDE BUT ARE NOT LIMITED TO: THE WATER TESTING OF SECOND FLOOR SHOWERS, THE WATER TESTING OF BATH TUBS, OR ANY PLUMBING, INACCESSIBLE AND/OR INSULATED ATTICS OR PORTIONS THEREOF, ATTICS WITH LESS THAN 18" CLEAR CRAWL SPACE, THE INTERIOR OF HOLLOW WALLS; THE CRAWL SPACE UNDERNEATH A DECK LESS THAN 12"; COVERED CEILINGS; SPACES BETWEEN A FLOOR OR PORCH DECK AND THE CEILING BELOW; AREAS WHERE THERE IS NO ACCESS WITHOUT DEBRACING OR TEARING OUT LUMBER, MASONRY, FOLIAGE OR FINISHED WORK; AREAS UNDERNEATH, BEHIND OR BELOW APPLIANCES OR BENEATH FLOOR COVERINGS OR FURNISHINGS OR STORAGE, LOCKED AREAS, AND AREAS REQUIRING AN EXTENSION LADDER; AREAS WHERE ENCUMBRANCES, STORAGE, CONDITIONS, OR LOCKS MAKE INSPECTION IMPRACTICAL; WOODEN MEMBERS OF THE SUB AREA CRAWL SPACE COVERED WITH INSULATION AND AREAS OR TIMBERS AROUND CAVES THAT WOULD REQUIRE USE OF AN EXTENSION LADDER. AREAS IN AND AROUND THE UNDERSIDE OF A SINK DUE TO STORAGE OR COVERINGS ON THE WOOD.

SLAB FLOOR CONSTRUCTION HAS BECOME MORE PREVALENT IN RECENT YEARS. FLOOR COVERING MAY CONCEAL CRACKS IN THE SLAB THAT WILL ALLOW INFESTATIONS TO ENTER. INFESTATIONS MAY BE CONCEALED BY PLASTER, SHEETROCK OR OTHER WALL COVERINGS SO THAT A DILIGENT INSPECTION MAY NOT UNCOVER THE TRUE CONDITION. IN THE PERFORMANCE OF CORRECTIVE MEASURES, IT MAY BE NECESSARY TO DRILL INTO CONCEALED AREAS AND/OR TO CUT OR REMOVE PLANTS. THE TERMITE EXTERMINATOR WILL NOT BE LIABLE FOR PLUMBING, HEATING, ELECTRICAL, GAS LINES AND EQUIPMENT IN OR UNDER A SLAB, NOR TO PLANTS WHICH MAY BE DAMAGED DURING TREATMENTS AND/OR REPAIRS.

GUARANTEE POLICY:

THIS GUARANTEE EXCLUDES STRUCTURES WITH SUB SLAB HEATING/AIR CONDITIONING SYSTEMS, PLENUM CONSTRUCTION WITH AIR CONDITIONING AND HEATING DUCT IN USE, A WELL OR CISTERN WITHIN FIFTY FEET AND AREAS THAT ARE INACCESSIBLE FOR TREATMENT. ADDITIONAL EXCLUSIONS INCLUDE STRUCTURES WITH DAMAGE TO OR FROM EXCESSIVE MOISTURE, INADEQUATE CONSTRUCTION, AREAS OF INACCESSIBILITY, DETERIORATING MATERIALS, MASONRY FAILURE, GRADE ALTERATION, PIPES AND CONDUITS BENEATH CONCRETE SLAB, FURNISHINGS OR CONTENTS, ETC. NO GUARANTEE WILL BE ISSUED FOR ANY WORK THAT IS A SECONDARY RECOMMENDATION OR WORK COMPLETED BY OTHERS. GUARANTEED FOR THIRTY DAYS ARE ANY PLUMBING, GROUTING, CAULKING AND RESETTING OF COMMODOES, SINKS OR ENCLOSURES, OR ANY OTHER STRUCTURAL REPAIR FOR DEFECTS IN MATERIALS OR WORKMANSHIP. ALL OTHER WORK PERFORMED BY THIS COMPANY SHALL BE GUARANTEED FOR ONE YEAR. THIS GUARANTEE IS LIMITED TO RETREATMENT ONLY AND DOES NOT PROVIDE PROTECTION AGAINST DAMAGE TO THE STRUCTURE OR ITS CONTENTS BY A REINFESTATION. FORMOSAN TERMITES ARE SPECIFICALLY EXCLUDED FROM ANY GUARANTEE EXPRESSED OR IMPLIED.

SECONDARY RECOMMENDATIONS ARE RECOMMENDATIONS TO PERFORM WORK TO CONTROL AN INFESTATION OR INFECTION USING METHODS THAT MAY BE BELOW STANDARD AND MAY NOT BE EFFECTIVE. SECONDARY RECOMMENDATIONS ARE USED WHEN PRIMARY RECOMMENDATIONS ARE NOT PRACTICABLE OR POSSIBLE OR AT THE REQUEST OF THE OWNER.

IF ONE OF THE RECOMMENDATIONS IN THIS REPORT INCLUDE THE USE OF FUMIGATION AS A CONTROL MEASURE THE OWNER, OR OWNERS AGENT UPON SIGNING THE WORK AUTHORIZATION CONTRACT ACCEPT THE USE OF ULTRA TECH FUMIGATION P.O. BOX 610866 SAN JOSE, CA. 95161 1-800-863-8884 AS THE SUBCONTRACT FUMIGATOR.

A WOOD DESTROYING PEST AND ORGANISM REPORT CONTAINS FINDINGS AS TO THE PRESENCE OR ABSENCE OF EVIDENCE WOOD DESTROYING INSECTS OR ORGANISMS IN VISIBLE AND ACCESSIBLE AREAS ON THE DATE OF THE INSPECTION AND CONTAINS OUR RECOMMENDATIONS FOR CORRECTING ANY INFESTATIONS, INFECTIONS OR CONDITIONS FOUND. SOME STRUCTURES MAY NOT COMPLY WITH BUILDING CODE REQUIREMENTS OR MAY HAVE STRUCTURAL OR MECHANICAL DEFECTS THAT DO NOT PERTAIN TO WOOD DESTROYING ORGANISMS. THIS INSPECTION REPORT DOES NOT CONTAIN INFORMATION ABOUT ANY SUCH DEFECTS. THIS FIRM DOES NOT INSPECT PLUMBING OR FIXTURES, WATER TEST SINKS, FAUCETS OR VALVES.

IF AN ESTIMATE OR BID WAS PROVIDED WITH THIS REPORT AND A REINSPECTION IS REQUESTED IT MUST BE DONE WITHIN FOUR MONTHS OF THE ORIGINAL REPORT AND THE FEE FOR ALL SUPPLEMENTAL OR REINSPECTIONS WILL BE THE SAME AS THE ORIGINAL INSPECTION FEE.

PLEASE SEE THE ENCLOSED WORK AUTHORIZATION FOR THE COST TO COMPLETE THE FOLLOWING ITEMS. NOTE: NO PAINTING OR DECORATION INCLUDED IN ANY ESTIMATE.

NOTE:

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.

NOTICE: REPORTS ON THIS STRUCTURE PREPARED BY VARIOUS REGISTERED COMPANIES SHOULD LIST THE SAME FINDINGS (i.e. TERMITES 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 OWNER OF THIS STRUCTURE HAS CERTAIN OBLIGATIONS REGARDING MAINTENANCE AND PERTAINING TO THE DETERRENCE OF WOOD DESTROYING ORGANISMS. MAINTENANCE PROCEDURES INCLUDE: BUT ARE NOT LIMITED TO: REASONABLE CLEANING, UPKEEP OF ROOFS, GUTTERS AND DOWNSPOUTS; PAINTING AND SEALING OF EXPOSED SURFACES; CAULKING ABOUT DOORS AND WINDOWS OR GROUTING ABOUT COMMODOES, TUB AND SHOWER ENCLOSURES; STORING MATERIALS ONE FOOT AWAY THE STRUCTURE'S FOUNDATIONS; PROVIDING ADEQUATE VENTILATION, MAINTAINING PROPER DRAINAGE AWAY FROM STRUCTURE (INCLUDING SPRINKLER SYSTEMS); KEEPING SOIL LEVELS BELOW THE TOP OF FOUNDATIONS AND PROHIBITING EARTH CONTACT

JUN 11 '98 03:37PM LYON & ASSOC. SIERRA

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THIRD PAGE OF STANDARD INSPECTION REPORT OF THE PROPERTY LOCATED AT:

838 VANDERBILT WY. * SACRAMENTO, CA 95828		
BLDG. NO.	STREET	CITY
1380667V	08/10/98	880877
STAMP NO.	DATE OF INSPECTION	CO. REPORT NO. (IF ANY)

WITH WOOD COMPONENTS OF THE STRUCTURE(S).

SECTIONED REPORTING

THIS IS A SEPARATED REPORT WHICH IS DEFINED AS SECTION I OR SECTION II CONDITIONS EVIDENT ON THE DATE OF THIS INSPECTION. SECTION I CONTAINS ITEMS WHERE THERE IS EVIDENCE OF ACTIVE INFESTATION, INFECTION OR CONDITIONS THAT HAVE RESULTED IN OR FROM INFESTATION OR INFECTION. SECTION II ITEMS ARE CONDITIONS DEEMED LIKELY TO LEAD TO INFESTATION OR INFECTION BUT WHERE NO VISIBLE EVIDENCE OF SUCH WAS FOUND. FURTHER INSPECTION ITEMS ARE DEFINED AS RECOMMENDATIONS TO INSPECT AREA(S) WHICH DURING THE ORIGINAL INSPECTION DID NOT ALLOW THE INSPECTOR ACCESS TO COMPLETE HIS INSPECTION AND CANNOT BE DEFINED AS SECTION I OR SECTION II.

11. EXTERIOR AREA**ITEM NO. 11A****FINDING: (SECTION 1)**

FUNGUS (DRY ROT) DAMAGE INDICATED BY 11A ON DIAGRAM. THE FUNGUS INFECTION WAS NOTED IN THE T-111 WOOD SIDING.

RECOMMENDATION:

REPAIR, REPLACE OR RE-INFORCE THOSE STRUCTURAL MEMBERS THAT APPEAR TO BE STRUCTURALLY WEAKENED BY THE FUNGUS INFECTION USING TODAY'S AVAILABLE WIDTH GRADES AND STYLES FROM LOCAL SUPPLIERS (NO SPECIAL MILLING). APPLY A SOLUTION OF DISODIUM OCTABORATE TETRAHYDRATE TO ARREST INFECTION IF A FUNGICIDE IS REQUIRED.

RECOMMENDATION:

OPEN FOR FURTHER INSPECTION. ISSUE A SUPPLEMENTAL REPORT OF FINDINGS.

ITEM NO. 11B**FINDING: (SECTION 1)**

FUNGUS (DRY ROT) DAMAGE INDICATED BY 11B ON DIAGRAM. THE FUNGUS INFECTION WAS NOTED IN THE TRIM.

RECOMMENDATION:

REPAIR, REPLACE OR RE-INFORCE THOSE STRUCTURAL MEMBERS THAT APPEAR TO BE STRUCTURALLY WEAKENED BY THE FUNGUS INFECTION USING TODAY'S AVAILABLE WIDTH GRADES AND STYLES FROM LOCAL SUPPLIERS (NO SPECIAL MILLING). APPLY A SOLUTION OF DISODIUM OCTABORATE TETRAHYDRATE TO ARREST INFECTION IF A FUNGICIDE IS REQUIRED.

ITEM NO. 11C**FINDING: (SECTION 1)**

FUNGUS (DRY ROT) DAMAGE INDICATED BY 11C ON DIAGRAM. THE FUNGUS INFECTION WAS NOTED IN THE PLYWOOD SOFFIT.

RECOMMENDATION:

REPAIR, REPLACE OR RE-INFORCE THOSE STRUCTURAL MEMBERS THAT APPEAR TO BE STRUCTURALLY WEAKENED BY THE FUNGUS INFECTION USING TODAY'S AVAILABLE WIDTH GRADES AND STYLES FROM LOCAL SUPPLIERS (NO SPECIAL MILLING). APPLY A SOLUTION OF DISODIUM OCTABORATE TETRAHYDRATE TO ARREST INFECTION IF A FUNGICIDE IS REQUIRED.

RECOMMENDATION:

OPEN FOR FURTHER INSPECTION. ISSUE A SUPPLEMENTAL REPORT OF FINDINGS.

ITEM NO. 11D**FINDING: (SECTION 1)**

FUNGUS (DRY ROT) DAMAGE INDICATED BY 11D ON DIAGRAM. THE FUNGUS INFECTION WAS NOTED IN THE BASE OF THE OVERHEAD DOOR JAMB.

RECOMMENDATION:

REPAIR, REPLACE OR RE-INFORCE THOSE STRUCTURAL MEMBERS THAT APPEAR TO BE STRUCTURALLY WEAKENED BY THE FUNGUS INFECTION USING TODAY'S AVAILABLE WIDTH GRADES AND STYLES FROM LOCAL SUPPLIERS (NO SPECIAL MILLING). APPLY A SOLUTION OF DISODIUM OCTABORATE TETRAHYDRATE TO ARREST INFECTION IF A FUNGICIDE IS REQUIRED.

FOURTH PAGE OF STANDARD INSPECTION REPORT OF THE PROPERTY LOCATED AT:

836 VANDERBILT WY. * SACRAMENTO, CA 95826

BLDG. NO.	STREET	CITY
138887V	09/16/98	95827
STAMP NO.	DATE OF INSPECTION	CO. REPORT NO. (IF ANY)

ITEM NO. 11E

FINDING: (SECTION 1)

FUNGUS (DRY ROT) DAMAGE INDICATED BY 11E ON DIAGRAM. THE FUNGUS INFECTON WAS NOTED IN THE PATIO COVER JOISTS, GIRDERS AND SUPPORT POST.

RECOMMENDATION:

REPAIR, REPLACE OR RE-INFORCE THOSE STRUCTURAL MEMBERS THAT APPEAR TO BE STRUCTURALLY WEAKENED BY THE FUNGUS INFECTON USING TODAYS AVAILABLE WIDTH GRADES AND STYLES FROM LOCAL SUPPLIERS (NO SPECIAL MILLING). APPLY A SOLUTION OF DISODIUM OCTABORATE TETRAHYDRATE TO ARREST INFECTON IF A FUNGICIDE IS REQUIRED.

ITEM NO. 11F

FINDING: (SECTION 2)

EARTH TO WOOD CONTACT AS INDICATED BY 11F ON THE DIAGRAM. THE CONTACT WAS IN THE ATTACHED FENCE.

RECOMMENDATION:

BREAK CONTACT AS APPROPRIATE.

COMMENTS AND OTHER INFORMATION AREA

NOTE:

THIS IS A LIMITED INSPECTION AT THE REQUEST OF THE OWNER OR OWNER'S AGENT JOE FRENCH AND PERTAINS TO ACCESSIBLE PORTIONS OF THE EXTERIOR OF THIS UNIT ONLY. WE RECOMMEND A FULL INSPECTION OF THIS STRUCTURE.

CALIFORNIA STATE LAW REQUIRES THAT YOU BE GIVEN THE FOLLOWING INFORMATION: "CAUTION PESTICIDES ARE TOXIC CHEMICALS". STRUCTURAL PEST CONTROL OPERATORS ARE LICENSED AND REGULATED BY THE STRUCTURAL PEST CONTROL BOARD, AND APPLY PESTICIDES WHICH ARE REGISTERED AND APPROVED FOR USE BY THE CALIFORNIA DEPARTMENT OF FOOD AND AGRICULTURE 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 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 HOURS FOLLOWING APPLICATION YOU EXPERIENCE SYMPTOMS SIMILAR TO COMMON SEASONAL ILLNESS COMPARABLE TO THE FLU, CONTACT YOUR PHYSICIAN OR POISON CONTROL CENTER AND YOUR PEST CONTROL OPERATOR IMMEDIATELY. FOR ADDITIONAL INFORMATION CONTACT THE COUNTY HEALTH DEPARTMENT; COUNTY AGRICULTURAL DEPARTMENT AND THE STRUCTURAL PEST CONTROL BOARD, 1422 HOWE AVE., SACRAMENTO, CA. 95825-3200.

IF WE HAVE RECOMMENDED THE USE OF A FUNGICIDE WE WILL USE:

* COPPER NAPHTHENATE - (AV) Copper Naphthenate: 20% - inert ingredients: 80%
or Timber DISODIUM OCTABORATE TETRAHYDRATE 80% INERT 2%.

IF WE HAVE RECOMMENDED THE TREATMENT OF SUBTERRANEAN TERMITES WE WILL USE:

* DEMON TC - (AA) Cypermethrin 9c-cyano-(3-phenoxyphenyl) methyl-cls, trans-3-(2,3-dichloroethoxy)-(2,2-dimethylpropanoate-carboxylate) 25.3%
or Dragnet TC - Permethrin (3-phenoxyphenyl) methyl (+) (-) cis trans (2,3-dichloroethoxy) - 2,2-dimethylpropanoate-carboxylate
cis:trans ratio: max. 55% (+) (-) cis and min. 45% (+) (-) trans.

IF A FUMIGATION IS RECOMMENDED: Fumigate with the registered fumigant sulfuryl fluoride or methyl bromide, depending on the conditions at the site. Chlorpyrifin shall be used as the warning agent. Check your posted re-entry notice for the actual fumigant used. Please note that the effect of overexposure for these materials can include the following: shortness of breath, double vision, unusual drowsiness and weakness and tremors. Your health and safety are our major concern. If you experience the symptoms as outlined here, leave the structure immediately and call our office.

FOR FURTHER INFORMATION CONTACT ANY OF THE FOLLOWING:

CITY	COUNTY HEALTH DEPARTMENTS:	CO. AGRICULTURAL COMMISSR.:
Sacramento -	(916) 366-2174	(916) 366-2000
El Dorado -	(916) 436-2131	(916) 626-2306
Placer -	(916) 633-4496	(916) 823-4371
Yuba -	(916) 656-8648	(916) 666-9140

STRUCTURAL PEST CONTROL BOARD (Regulatory Information):

1422 Howe Ave, Sacramento, Ca. 95826 (916) 263-2540

POISON CONTROL CENTER: 1-800-368-4283

WOOD DESTROYING PEST AND ORGANISMS INSPECTION REPORT

This is an inspection report only – not a Notice of Completion

ADDRESS OF PROPERTY INSPECTED

BUILDING NO. 935	STREET VANDERBILT WY.	CITY SACRAMENTO	ZIP 95825	COUNTY CODE 34	DATE OF INSPECTION 07/16/98	NUMBER OF PAGES 4
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MARATHON TERMITE & PEST CONTROL

Affix stamp here to Board copy only

3263 MONIER CR. STE. I
RANCHO CORDOVA, CA. 95742
916-442-1950 FAX 916-635-6283

A LICENSED PEST CONTROL OPERATOR IS AN EXPERT IN HIS FIELD. ANY QUESTIONS RELATIVE TO THIS REPORT SHOULD BE REFERRED TO HIM/HER

REGISTRATION # PR 3052	REPORTS # 981126	STAMP # 1576701V	ESCROW # 504942
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ORDERED BY: JOE FRENCH @ LYON AND ASSOCIATES, 2580 FAIR OAKS BLVD. STE. 20, SACRAMENTO, CA 95825
Ph# 916-481-3840 * Fax: 916-484-7683

REPORT SENT TO: ANITA @ SACRAMENTO TITLE CO., 2401 AMERICAN RIVER DR., SACRAMENTO, CA 95825
Ph# 916-484-0550 * Fax: 916

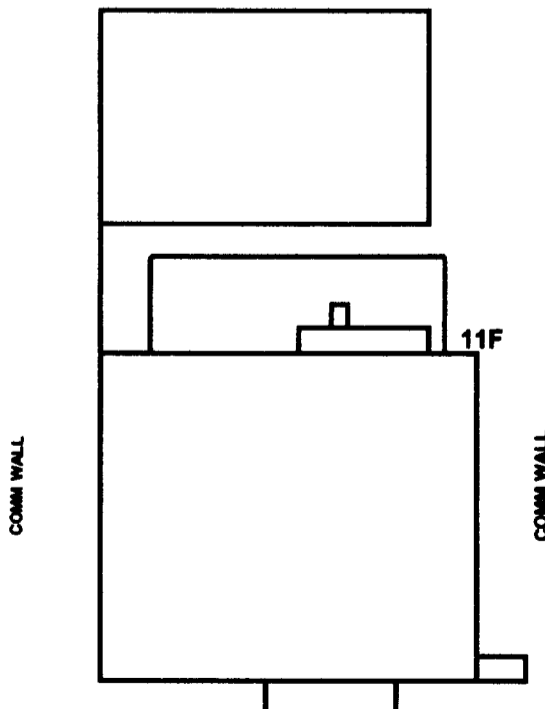
PROPERTY OWNER: ARNOLD LEVINE 935 VANDERBILT WY. * SACRAMENTO, CA 95825

PARTY IN INTEREST: _____

ORIGINAL REPORT <input type="checkbox"/>	LIMITED REPORT <input type="checkbox"/>	SUPPLEMENTAL REPORT <input type="checkbox"/>	REINSPECTION REPORT <input checked="" type="checkbox"/>	Original Stamp # 1360657V	Date 06/10/98												
GENERAL DESCRIPTION: Multi-family residence.				<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="writing-mode: vertical-rl; transform: rotate(180deg);">IN ACCESSIBLE AREAS</td> <td style="writing-mode: vertical-rl; transform: rotate(180deg);">NOT INSPECTED</td> <td style="writing-mode: vertical-rl; transform: rotate(180deg);">FURTHER INSPECTION</td> <td style="writing-mode: vertical-rl; transform: rotate(180deg);">SUBSTRATE ANNEAL TERMITES</td> <td style="writing-mode: vertical-rl; transform: rotate(180deg);">DRY WOOD TERMITES</td> <td style="writing-mode: vertical-rl; transform: rotate(180deg);">FUNGUS OR DRY ROT</td> <td style="writing-mode: vertical-rl; transform: rotate(180deg);">OTHER WOOD PESTS</td> <td style="writing-mode: vertical-rl; transform: rotate(180deg);">DAMP WOOD TERMITES</td> <td style="writing-mode: vertical-rl; transform: rotate(180deg);">EARTH WOOD CONTACT</td> <td style="writing-mode: vertical-rl; transform: rotate(180deg);">FAULTY GRADE LEVELS</td> <td style="writing-mode: vertical-rl; transform: rotate(180deg);">CELLULOSE DEBRIS</td> <td style="writing-mode: vertical-rl; transform: rotate(180deg);">EXCESSIVE MOISTURE</td> <td style="writing-mode: vertical-rl; transform: rotate(180deg);">STALL SHOWER</td> </tr> </table>	IN ACCESSIBLE AREAS	NOT INSPECTED	FURTHER INSPECTION	SUBSTRATE ANNEAL TERMITES	DRY WOOD TERMITES	FUNGUS OR DRY ROT	OTHER WOOD PESTS	DAMP WOOD TERMITES	EARTH WOOD CONTACT	FAULTY GRADE LEVELS	CELLULOSE DEBRIS	EXCESSIVE MOISTURE	STALL SHOWER
IN ACCESSIBLE AREAS	NOT INSPECTED	FURTHER INSPECTION	SUBSTRATE ANNEAL TERMITES		DRY WOOD TERMITES	FUNGUS OR DRY ROT	OTHER WOOD PESTS	DAMP WOOD TERMITES	EARTH WOOD CONTACT	FAULTY GRADE LEVELS	CELLULOSE DEBRIS	EXCESSIVE MOISTURE	STALL SHOWER				
INSPECTION TAG POSTED: <u>Garage.</u>																	
OTHER INSPECTION TAGS: _____																	
1. SUBSTRUCTURE AREA <u>Slab.</u>																	
2. STALL SHOWER <u>No Ground Floor Shower.</u>																	
3. FOUNDATION <u>Slab.</u>																	
4. PORCHES - STEPS <u>Concrete.</u>																	
5. VENTILATION <u>None.</u>																	
6. ABUTMENTS																	
7. ATTIC SPACES <u>Insulated.</u>																	
8. GARAGES <u>Detached.</u>																	
9. DECKS - PATIOS																	
10. OTHER - INTERIOR																	
11. OTHER - EXTERIOR																	

DIAGRAM AND EXPLANATION OF FINDINGS (This report is limited to structure or structures shown on diagram.)

NOTE: Diagram is not to scale and findings are in approximate locations.



Inspected By DAVID W. MILLER License No. OPR 8734

Signature

NOTE: Questions or problems concerning the above report should be directed to the manager of the company. Unresolved questions or problems with services performed may be directed to the Structural Pest Control Board at (800) 737-8188 or (916) 263-2533. You are entitled to obtain copies of all reports and completion notices on this property filed with the Board during the preceding two years upon payment of a \$ 2.00 search fee to: The Structural Pest Control Board, 1422 Howe Ave., STE 3, Sacramento, California 95825-3280.

SECOND PAGE OF STANDARD INSPECTION REPORT OF THE PROPERTY LOCATED AT:

935 VANDERBILT WY. * SACRAMENTO, CA 95825

BLDG. NO.	STREET	CITY
1576701V	07/16/98	981128
STAMP NO.	DATE OF INSPECTION	CO. REPORT NO. (IF ANY)

NOTES, CAUTIONS, AND DISCLAIMERS AREA

THE PEST CONTROL INDUSTRY RECOGNIZES A STRUCTURE TO HAVE CERTAIN AREAS THAT ARE INACCESSIBLE AND NOT INSPECTED. THESE AREAS WERE NOT INSPECTED BY THIS FIRM. THESE AREAS INCLUDE BUT ARE NOT LIMITED TO: THE WATER TESTING OF SECOND FLOOR SHOWERS DUE TO THE COVERED SHOWER PAN, THE WATER TESTING OF BATH TUBS, OR ANY PLUMBING, INACCESSIBLE AND/OR INSULATED ATTICS OR PORTIONS THEREOF DUE TO THE COVERED CEILING JOISTS, ATTICS WITH LESS THAN 18" CLEAR CRAWL SPACE DUE TO LIMITED ACCESS, THE INTERIOR OF HOLLOW WALLS OR ANY OTHER WOODEN MEMBER COVERED BY INSULATION, PLASTER, STUCCO, PAINT, TILE, SHEETROCK OR ANY OTHER MATERIAL; THE CRAWL SPACE UNDERNEATH A DECK LESS THAN 12" DUE TO THE LIMITED ACCESS FOR OUR INSPECTOR; COVERED CEILING; SPACES BETWEEN A FLOOR OR PORCH DECK AND THE CEILING BELOW; AREAS WHERE THERE IS NO ACCESS WITHOUT DEFACING OR TEARING OUT LUMBER, MASONRY, FOLIAGE OR ANY OTHER FINISHED WORK; AREAS UNDERNEATH, BEHIND OR BELOW APPLIANCES BECAUSE WE DO NOT MOVE APPLIANCES OR BENEATH FLOOR COVERINGS OR FURNISHINGS BECAUSE WE DO NOT REMOVE THESE ITEMS FOR INSPECTION OR STORAGE BECAUSE OUR INSPECTOR DOES NOT MOVE STORED ITEMS. LOCKED AREAS, AND AREAS REQUIRING AN EXTENSION LADDER BECAUSE OUR INSPECTOR DOES NOT CARRY A LADDER; AREAS WHERE ENCUMBRANCES, STORAGE, CONDITIONS, OR LOCKS MAKE INSPECTION IMPRACTICAL; WOODEN MEMBERS OF THE SUB AREA CRAWL SPACE COVERED WITH INSULATION BECAUSE OUR INSPECTOR DOES NOT REMOVE THE INSULATION, AREAS IN AND AROUND THE UNDERSIDE OF A SINK DUE TO STORAGE OR COVERINGS ON THE WOOD BECAUSE OUR INSPECTOR DOES NOT REMOVE YOUR STORED ITEMS. CONDITIONS CONDUCIVE TO AN INFESTATION OR INFECTION COULD EXHIST IN ANY UNINSPECTED AREA. THIS REPORT EXPRESSES NO OPINION REGARDING THE CONDITION OF UNINSPECTED AREAS. ALTHOUGH IT APPEARS TO BE NOT PRACTICABLE TO TO OPEN THESE AREAS FOR INSPECTION, MARATHON WILL INSPECT ANY OF THEM AT YOUR DIRECTION AT ADDITIONAL COST.

SLAB FLOOR CONSTRUCTION HAS BECOME MORE PREVALENT IN RECENT YEARS. FLOOR COVERING MAY CONCEAL CRACKS IN THE SLAB THAT WILL ALLOW INFESTATIONS TO ENTER. INFESTATIONS MAY BE CONCEALED BY PLASTER, SHEETROCK OR OTHER WALL COVERINGS SO THAT A DILIGENT INSPECTION MAY NOT UNCOVER THE TRUE CONDITION. IN THE PERFORMANCE OF CORRECTIVE MEASURES, IT MAY BE NECESSARY TO DRILL INTO CONCEALED AREAS AND/OR TO CUT OR REMOVE PLANTS. THE TERMITE EXTERMINATOR WILL NOT BE LIABLE FOR PLUMBING, HEATING, ELECTRICAL, GAS LINES AND EQUIPMENT IN OR UNDER A SLAB, NOR TO PLANTS WHICH MAY BE DAMAGED DURING TREATMENTS AND/OR REPAIRS.

GUARANTEE POLICY:

THIS GUARANTEE EXCLUDES STRUCTURES WITH SUB SLAB HEATING/AIR CONDITIONING SYSTEMS, PLENUM CONSTRUCTION WITH AIR CONDITIONING AND HEATING DUCT IN USE, A WELL OR CISTERN WITHIN FIFTY FEET AND AREAS THAT ARE INACCESSIBLE FOR TREATMENT. ADDITIONAL EXCLUSIONS INCLUDE STRUCTURES WITH DAMAGE TO OR FROM EXCESSIVE MOISTURE, INADEQUATE CONSTRUCTION, AREAS OF INACCESSIBILITY, DETERIORATING MATERIALS, MASONRY FAILURE, GRADE ALTERATION, PIPES AND CONDUITS BENEATH CONCRETE SLAB, FURNISHINGS OR CONTENTS, ETC. NO GUARANTEE WILL BE ISSUED FOR ANY WORK THAT IS A SECONDARY RECOMMENDATION OR WORK COMPLETED BY OTHERS. GUARANTEED FOR THIRTY DAYS ARE ANY PLUMBING, GROUTING, CAULKING AND RESETTING OF COMMODES, SINKS OR ENCLOSURES, OR ANY OTHER STRUCTURAL REPAIR FOR DEFECTS IN MATERIALS OR WORKMANSHIP. ALL OTHER WORK PERFORMED BY THIS COMPANY SHALL BE GUARANTEED FOR ONE YEAR. THIS GUARANTEE IS LIMITED TO RETREATMENT ONLY AND DOES NOT PROVIDE PROTECTION AGAINST DAMAGE TO THE STRUCTURE OR ITS CONTENTS BY A REINFESTATION. FORMOSAN TERMITES ARE SPECIFICALLY EXCLUDED FROM ANY GUARANTEE EXPRESSED OR IMPLIED.

SECONDARY RECOMMENDATIONS ARE RECOMMENDATIONS TO PERFORM WORK TO CONTROL AN INFESTATION OR INFECTION USING METHODS THAT MAY BE BELOW STANDARD AND MAY NOT BE EFFECTIVE. SECONDARY RECOMMENDATIONS ARE USED WHEN PRIMARY RECOMMENDATIONS ARE NOT PRACTICABLE OR POSSIBLE OR AT THE REQUEST OF THE OWNER.

IF ONE OF THE RECOMMENDATIONS IN THIS REPORT INCLUDE THE USE OF FUMIGATION AS A CONTROL MEASURE THE OWNER, OR OWNERS AGENT UPON SIGNING THE WORK AUTHORIZATION CONTRACT ACCEPT THE USE OF ULTRA TECH FUMIGATION P.O. BOX 610866 SAN JOSE, CA. 95161 1-800-863-8664 AS THE SUBCONTRACT FUMIGATOR.

A WOOD DESTROYING PEST AND ORGANISM REPORT CONTAINS FINDINGS AS TO THE PRESENCE OR ABSENCE OF EVIDENCE WOOD DESTROYING INSECTS OR ORGANISMS IN VISIBLE AND ACCESSIBLE AREAS ON THE DATE OF THE INSPECTION AND CONTAINS OUR RECOMMENDATIONS FOR CORRECTING ANY INFESTATIONS, INFECTIONS OR CONDITIONS FOUND. SOME STRUCTURES MAY NOT COMPLY WITH BUILDING CODE REQUIREMENTS OR MAY HAVE STRUCTURAL OR MECHANICAL DEFECTS THAT DO NOT PERTAIN TO WOOD DESTROYING ORGANISMS. THIS INSPECTION REPORT DOES NO CONTAIN INFORMATION ABOUT ANY SUCH DEFECTS. THIS FIRM DOES NOT INSPECT PLUMBING OR FIXTURES, WATER TEST SINKS, FAUCETS OR VALVES.

IF AN ESTIMATE OR BID WAS PROVIDED WITH THIS REPORT AND A REINSPECTION IS REQUESTED IT MUST BE DONE WITHIN FOUR MONTHS OF THE ORIGINAL REPORT AND THE FEE FOR ALL SUPPLEMENTAL OR REINSPECTIONS WILL BE THE SAME AS THE ORIGINAL INSPECTION FEE.

PLEASE SEE THE ENCLOSED WORK AUTHORIZATION FOR THE COST TO COMPLETE THE FOLLOWING ITEMS. NOTE: NO PAINTING OR DECORATION INCLUDED IN ANY ESTIMATE.

NOTE:

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.

THIRD PAGE OF STANDARD INSPECTION REPORT OF THE PROPERTY LOCATED AT:

935 VANDERBILT WY. * SACRAMENTO, CA 95825

BLDG. NO.	STREET	CITY
1576701V	0718/98	981126
STAMP NO.	DATE OF INSPECTION	CO. REPORT NO. (IF ANY)

NOTICE: REPORTS ON THIS STRUCTURE PREPARED BY VARIOUS REGISTERED COMPANIES SHOULD LIST THE SAME FINDINGS (ie. 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 OWNER OF THIS STRUCTURE HAS CERTAIN OBLIGATIONS REGARDING MAINTENANCE AND PERTAINING TO THE DETERRENCE OF WOOD DESTROYING ORGANISMS. MAINTENANCE PROCEDURES INCLUDE; BUT ARE NOT LIMITED TO: REASONABLE CLEANING, UPKEEP OF ROOFS, GUTTERS AND DOWNSPOUTS; PAINTING AND SEALING OF EXPOSED SURFACES; CAULKING ABOUT DOORS AND WINDOWS OR GROUTING ABOUT COMMODES, TUB AND SHOWER ENCLOSURES; STORING MATERIALS ONE FOOT AWAY THE STRUCTURE'S FOUNDATIONS; PROVIDING ADEQUATE VENTILATION, MAINTAINING PROPER DRAINAGE AWAY FROM STRUCTURE (INCLUDING SPRINKLER SYSTEMS); KEEPING SOIL LEVELS BELOW THE TOP OF FOUNDATIONS AND PROHIBITING EARTH CONTACT WITH WOOD COMPONENTS OF THE STRUCTURE(S).

NOTE:

DAME TO COMMON WALL 11A NOT REPAIRED AS IT IS CONSIDERED PART OF THE ADJOINING UNIT.

NOTE:

11F NOT COMPLETED AS IT IS A COMMON FENCE.

NOTE:

REPAIRS WERE IN PROGRESS AT THE TIME OF REINSPECTION, BUT WERE SUFFICIENTLY COMPLETE TO ALLOW TECHNICAL CERTIFICATION. UNDER NO CIRCUMSTANCES DOES THIS FIRM GUARANTEE WORK COMPLETED BY OTHERS.

NOTE:

GUARANTEES SHOULD BE OBTAINED FROM PARTIES PERFORMING REPAIRS. FURTHER INSPECTIONS AS RECOMMENDED WERE NOT PERFORMED BY THIS FIRM.

NOTE:

THIS IS A REINSPECTION OF THE WORK DONE AT THIS PROPERTY. PLEASE REFER TO THE ORIGINAL REPORT DATED 6/10/98 WITH STAMP #1380657V FOR PREVIOUSLY NOTED CONDITIONS. ITEMS INSPECTED: 11A, 11B, 11C, 11D, 11E

THIS IS TO CERTIFY THAT THE PROPERTY DESCRIBED HEREIN IS NOW FREE OF EVIDENCE OF ACTIVE INFESTATION OR INFECTION IN THE VISIBLE, ACCESSIBLE AND INSPECTED AREAS. ONLY WORK COMPLETED BY MARATHON IS GUARANTEED BY MARATHON. MARATHON ASSUMES NO LIABILITY REGARDING WORKMANSHIP, COMPETENCY OF THE WORK PERFORMED, APPEARANCE OF WORK, CODE COMPLIANCE OR FITNESS TO PERFORM OF WORK COMPLETED BY OTHERS. THIS STATEMENT RELATES ONLY TO THE EVIDENCE OF AN INFESTATION OR INFECTION AT THE TIME OF INSPECTION IN THE VISIBLE AND ACCESSIBLE AREAS.

SECTIONED REPORTING

THIS IS A SEPARATED REPORT WHICH IS DEFINED AS SECTION I OR SECTION II CONDITIONS EVIDENT ON THE DATE OF THIS INSPECTION. SECTION I CONTAINS ITEMS WHERE THERE IS EVIDENCE OF ACTIVE INFESTATION, INFECTION OR CONDITIONS THAT HAVE RESULTED IN OR FROM INFESTATION OR INFECTION. SECTION II ITEMS ARE CONDITIONS DEEMED LIKELY TO LEAD TO INFESTATION OR INFECTION BUT WHERE NO VISIBLE EVIDENCE OF SUCH WAS FOUND. FURTHER INSPECTION ITEMS ARE DEFINED AS RECOMMENDATIONS TO INSPECT AREA(S) WHICH DURING THE ORIGINAL INSPECTION DID NOT ALLOW THE INSPECTOR ACCESS TO COMPLETE HIS INSPECTION AND CANNOT BE DEFINED AS SECTION I OR SECTION II.

11. EXTERIOR AREA

ITEM NO. 11F

FINDING: (SECTION 2)

EARTH TO WOOD CONTACT AS INDICATED BY 11F ON THE DIAGRAM. THE CONTACT WAS IN THE ATTACHED FENCE.

RECOMMENDATION:

BREAK CONTACT AS APPROPRIATE.

FOURTH PAGE OF STANDARD INSPECTION REPORT OF THE PROPERTY LOCATED AT:

935 VANDERBILT WY. * SACRAMENTO, CA 95825

BLDG. NO.	STREET	CITY
1576701V	07/16/98	981126
STAMP NO.	DATE OF INSPECTION	CO. REPORT NO. (IF ANY)

COMMENTS AND OTHER INFORMATION AREA

CALIFORNIA STATE LAW REQUIRES THAT YOU BE GIVEN THE FOLLOWING INFORMATION: "CAUTION PESTICIDES ARE TOXIC CHEMICALS". STRUCTURAL PEST CONTROL OPERATORS ARE LICENSED AND REGULATED BY THE STRUCTURAL PEST CONTROL BOARD, AND APPLY PESTICIDES WHICH ARE REGISTERED AND APPROVED FOR USE BY THE CALIFORNIA DEPARTMENT OF FOOD AND AGRICULTURE 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 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 HOURS FOLLOWING APPLICATION YOU EXPERIENCE SYMPTOMS SIMILAR TO COMMON SEASONAL ILLNESS COMPARABLE TO THE FLU, CONTACT YOUR PHYSICIAN OR POISON CONTROL CENTER AND YOUR PEST CONTROL OPERATOR IMMEDIATELY. FOR ADDITIONAL INFORMATION CONTACT THE COUNTY HEALTH DEPARTMENT; COUNTY AGRICULTURAL DEPARTMENT AND THE STRUCTURAL PEST CONTROL BOARD, 1422 HOWE AVE., SACRAMENTO, CA. 95825-3280.

IF WE HAVE RECOMMENDED THE USE OF A FUNGICIDE WE WILL USE:

* COPPER NAPHTHENATE - (A/I) Copper Naphthenate: 20% - Inert Ingredients: 80%
or TimBor DISODIUM OCTABORATE TETRAHYDRATE 98% INERT 2%.

IF WE HAVE RECOMMENDED THE TREATMENT OF SUBTERRANEAN TERMITES WE WILL USE:

* DEMON T/C - (A/I) Cypermethrin 9o-cyano-[3-phenoxyphenyl] [methyl-cis, trans-3-[2,2-dichloroethenyl]-2,2-dimethylcyclopropane-carboxylate) 25.3%
or Dagnet T/C - Permethrin (3-phenoxyphenyl) methyl (+) (-) cis trans (2,2-dichloroethenyl) - 2,2- dimethylcyclopropanecarboxylate
cis/trans ratio: max. 55% (+) (-) cis and min. 45% (+) (-) trans.

IF A FUMIGATION IS RECOMMENDED: Fumigate with the registered fumigant sulfuryl fluoride or methyl bromide, depending on the conditions at the site. Chloropicrin shall be used as the warning agent. Check your posted re-entry notice for the actual fumigant used. Please note that the effect of overexposure for these materials can include the following: shortness of breath, double vision, unusual drowsiness and weakness and tremors. Your health and safety are our major concern. If you experience the symptoms as outlined here, leave the structure immediately and call our office.

FOR FURTHER INFORMATION CONTACT ANY OF THE FOLLOWING:

CITY	COUNTY HEALTH DEPARTMENTS:	CO. AGRICULTURAL COMMSR.:
Sacramento -	(916) 366-2174	(916) 366-2003
El Dorado -	(916) 626-2131	(916) 626-2305
Placer-	(916) 823-4465	(916) 823-4371
Yolo-	(916) 656-8649	(916) 656-8140

STRUCTURAL PEST CONTROL BOARD (Regulatory Information) :

1422 Howe Ave. Sacramento, Ca. 95825 (916) 263-2540

POISON CONTROL CENTER: 1-800-342-9293