



12025 Florence Ave. Suite #304 Santa Fe Springs, CA. 90670

OFFICIAL FAX COVER SHEET

Send To: Mr. Ho	From: glady's
RE: 13487 Del Bonita Rowland Heights	Date: 9/30/10
Fax Number: (626) 309-3224	Fax Number: (562) 942-8122
Phone Number: (626) 523-1097	Phone Number: (562) 942-8100 or (888) 942-8144

<input type="checkbox"/> URGENT	<input type="checkbox"/> REPLY ASAP	<input type="checkbox"/> PLEASE COMMENT	<input type="checkbox"/> PLEASE REVIEW	<input type="checkbox"/> FOR YOUR INFORMATION
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Total pages, including cover:

Comments:

Thank you for your time and patience. Enclosed Is the Termite Report for the above mentioned property. Please take your time and review the termite inspection report, if you have any Questions and/or any concerns, please do not hesitate to contact our Office.

To schedule a date for the termite work to be done. Please Sign, E-mail and/or Fax the last page of the termite report, which is the work authorization form. Please enclose Escrow Information.

Thank you very much in advance for your time & consideration, for giving our company the opportunity in working with you, and trusting us with your business.

Remember: An Apple A Day Keeps The Termites Away...

Email info:

Monica@appletermite.com

Alonzo@appletermite.com


Sales@appletermite.com

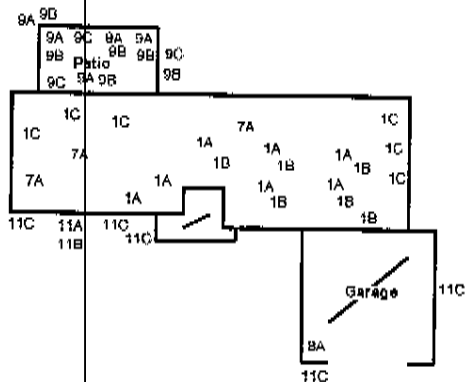
Frank@appletermite.com

Best Regards,

CONFIDENTIALITY NOTICE: This Facsimile transmission is intended only for the addressee shown above. It may contain information that is privileged, confidential or otherwise protected from disclosure. Any review, dissemination or use of this transmission or any of its contents by persons other than the addressee is strictly prohibited. If you received this fax in error, please call us immediately upon receipt and return the facsimile documents, by first class mail, to the address above. Thank you for your cooperation.

WOOD DESTROYING PESTS AND ORGANISMS INSPECTION REPORT

Building Address: 18487 Del Bonita, Rowland Heights, CA		Date of Inspection 09/30/2010	Number of Pages 6
	Apple Termite 12025 Florence Ave. Suite 304 Santa Fe Springs, CA 90670	Office: (562) 942-8100 Office: (909) 899-6900 Toll-Free: (888) 942-8144 Fax: (562) 942-8122 Email: sales@appletermite.com	
		Report # W8529	
		Lic. Registration # PR5934	
Escrow #			
Ordered by Diamond Hills Realty Mr Ho 1320 Valley Vista 101 Diamond Bar, CA 91765	Property Owner and/or Party of Interest: Diamond Hills Realty Mr Ho 1320 Valley Vista 101 Diamond Bar, CA 91765	Report Sent to: Diamond Hills Realty Mr Ho 1320 Valley Vista 101 Diamond Bar, CA 91765	
COMPLETE REPORT <input checked="" type="checkbox"/> LIMITED REPORT <input type="checkbox"/> SUPPLEMENTAL REPORT <input type="checkbox"/> REINSPECTION REPORT <input type="checkbox"/>			
General Description: Single story single family residence with a composition roof and an attached garage		Inspection Tag Posted: Attic Other Tags Posted: None	
An inspection has been made of the structure(s) shown on the diagram in accordance with the Structural Pest Control Act. Detached porches, detached steps, detached decks and any other structures not on the diagram were not inspected.			
Subterranean Termites <input checked="" type="checkbox"/> Drywood Termites <input checked="" type="checkbox"/> Fungus / Dryrot <input type="checkbox"/> Other Findings <input type="checkbox"/> Further Inspection <input type="checkbox"/>			
If any of the above boxes are checked, it indicates that there were visible problems in accessible areas. Read the report for the details on checked items.			



This Diagram is not to scale

Inspected by: Wendell T Polk State License No. FR21710 Signature _____

You are entitled to obtain copies of all reports and completion notices on this property reported to the Structural Pest Control Board during the preceding two years. To obtain copies contact: Structural Pest Control Board, 2005 Evergreen Street, Ste. 1500, Sacramento, California 95815.

NOTE: Questions or problems concerning the above report should be directed to the manager of the company. Unresolved questions or problems with the services performed may be directed to the Structural Pest Control Board at (916) 561-8708, (800) 737-8188 or www.pestboard.ca.gov

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

Address **18487 Del Bonita, Rowland Heights, CA****09/30/2010****W8529**

Date

Report #

What is a Wood Destroying Pest and Organism Inspection Report?

The following 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 finding as to the presence or absence of wood destroying insects or organisms in visible and accessible areas on the date of inspection and contains our recommendations for correcting any infestations, infections, or conditions found. The contents of the wood destroying pest & organism inspection report are governed by the structural pest control act and its rules and regulations.

Some structures may not comply with building code requirements or may have structural, plumbing, electrical, heating and air conditioning, or other defects that do not pertain to this report. This report does not address any such defects as they are not within the scope of the license of the inspector or the company issuing this report.

The following areas are considered inaccessible for purposes of inspection or are not included in a normal inspection report and therefore are excluded in this report: the interior of hollow walls; spaces between an upstairs floor and the ceiling below or a porch deck and soffit below; stall showers over finished ceilings; such structural segments as areas enclosed by bay windows, buttresses, built in cabinet work, areas under floor covering; any areas requiring the removal of storage, furnishings or appliances; any areas to which there is no access without defacing or removing lumber, masonry or finished workmanship.

Certain areas are recognized by the industry as inaccessible and/or for other reasons not inspected. These include but are not limited to: inaccessible and/or, insulated attics or portions thereof, attics with less than 18" clear crawl space, the interior of hollow walls; spaces between a floor or porch deck and the ceiling below; areas where there is no access without defacing or tearing out lumber, masonry or finished work; make inspection impractical; and areas of timbers around eaves that would require use of an extension ladder.

Certain areas may be inaccessible for inspection due to construction or storage. We recommend further inspection of areas where inspection was impractical. Re: Structural Pest Control Act, Article 6, section 8516 (b), paragraph 1990 (l). Amended effective March 1, 1974. Stall shower, if any, are water tested in compliance with Section 1991 (12) of the Structural Pest Control Act. The absence or presence of leaks through sub-floor, adjacent floors or walls will be reported. This is a report of the condition of the stall shower at the time of inspection only, and should not be confused as a guarantee. Although we make a visual examination, we do not deface or probe into window or door frames, decorative trim, roof members, etc., in search of wood destroying pests or organisms.

"This company will reinspect repairs done by others within four months of the original inspection. A charge, if any, 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."

NOTE: We do not inspect or certify plumbing, plumbing fixtures, etc.

NOTE: "The exterior surface of the roof was not inspected. If you want the water tightness of the roof determined, you should contract a roofing contractor who is licensed by the Contractor's State License Board."

"NOTICE: The charge for service that this company subcontracts to another registered company may include the company's charges for arranging and administering such services that are in addition to the direct costs associated with paying the subcontractor. You may accept APPLE TERMITE INC's bid or you may contract directly with another registered company licensed to perform the work. If you choose to contract directly with another registered company, APPLE TERMITE INC will not in any way be responsible for any act or omission in the performance of work that you directly contract with another to perform."

"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."

This 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 the appropriate mold professional.

"Local treatment is not intended to be an entire structure treatment method. If infestations or wood-destroying pests extend or exist beyond the area(s) of local treatment, they may not be exterminated."

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

Address 18487 Del Bonita, Rowland Heights, CA

09/30/2010

W8529

Date

Report #

This is a separated report which is defined as Section I/Section II conditions evident on the date of the inspection. Section I contains items where there is visible evidence of active infestation, infection or conditions that have resulted in or from infestation of 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 the inspection and cannot be defined as Section I or Section II.

FINDINGS AND RECOMMENDATIONS**Substructure:**

- 1A PRICE: \$425.00 (Section I)
 FINDINGS: Evidence of subterranean termite infestation as indicated on the diagram.
 RECOMMENDATION: Pressure "ROD" treat, trench application or low pressure spot spray as necessary. Break accessible sub tubes.
- 1B PRICE: See 1A (Section I)
 FINDINGS: Evidence of subterranean termite infestation as indicated on the diagram.
 RECOMMENDATION: Pressure "ROD" treat, trench application or low pressure spot spray as necessary. Break accessible sub tubes.
- 1C PRICE: See 1A (Section I)
 FINDINGS: Evidence of drywood termite infestations as indicated on the diagram.
 RECOMMENDATION: Chemically treat visible and accessible infestations. Remove or cover accessible pellets.

Attic Spaces:

- 7A PRICE: See 1A (Section I)
 FINDINGS: Evidence of drywood termite infestations as indicated on the diagram.
 RECOMMENDATION: Chemically treat visible and accessible infestations. Remove or cover accessible pellets.

Garages:

- 8A PRICE: See 1A (Section I)
 FINDINGS: Evidence of drywood termite infestations as indicated on the diagram.
 RECOMMENDATION: Chemically treat visible and accessible infestations. Remove or cover accessible pellets.

Decks - Patios:

- 9A PRICE: See 1A (Section I)
 FINDINGS: Evidence of drywood termite infestations as indicated on the diagram.
 RECOMMENDATION: Chemically treat visible and accessible infestations. Remove or cover accessible pellets.

- Findings and Recommendations continued on next page -

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

Address **18487 Del Bonita, Rowland Heights, CA**

09/30/2010

W8529

Date

Report #

- Findings and Recommendations continued from previous page -

9B PRICE: \$750.00 (Section I)
 FINDINGS: Evidence of termite damaged wood members noted at time of inspection as indicated on the diagram.
 RECOMMENDATION: Replace termite damaged wood members as necessary. No painting is included in this estimate.

9C PRICE: See 9B (Section I)
 FINDINGS: Evidence of termite damaged wood members noted at time of inspection as indicated on the diagram.
 RECOMMENDATION: Replace termite damaged wood members as necessary. No painting is included in this estimate.

Other Exterior:

11A PRICE: See 1A (Section I)
 FINDINGS: Evidence of drywood termite infestations as indicated on the diagram.
 RECOMMENDATION: Chemically treat visible and accessible infestations. Remove or cover accessible pellets.

11B PRICE: See 9B (Section I)
 FINDINGS: Evidence of termite damaged wood members noted at time of inspection as indicated on the diagram.
 RECOMMENDATION: Replace termite damaged wood members as necessary. No painting is included in this estimate.

11C PRICE: See 9B (Section I)
 FINDINGS: Dry-rot wood members found at time of inspection as indicated on the diagram.
 RECOMMENDATION: Replace dry-rot damaged wood members as necessary. No painting is included in this estimate.

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

Address 18487 Del Bonita, Rowland Heights, CA09/30/2010W8529

Date

Report #

In accordance with the laws and regulation of the State of California, we are required to provide you with the following information prior to application of pesticides to your property.

"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 24 hours following application you experience symptoms similar to common seasonal illness comparable to the flu, contact your physician or poison control center (800) 876-4766 and your pest control company immediately." "For further information, contact any of the following

For further information, contact any of the following:

APPLE TERMITE INC (562) 942-8100

Poison Control Center (800) 876-4766

(Health Questions) County Health Dept.
Orange County (714) 834-7700

Los Angeles County (213) 250-8055

San Bernardino County (909) 387-6280

Riverside County (909) 358-5000

(Application Info.) County Agriculture Commission
Orange County (714) 447-7100

Los Angeles County (626) 575-5465

San Bernardino County (909) 387-2115

Riverside County (951) 955-3000

Structural Pest Control Board (Regulatory Info.) (916) 561-8704
2005 Evergreen Street, Ste. 1500 Sacramento, CA 95815

TERMITE AND FUNGUS CONTROL CHEMICALS

Demon TC (EPA Reg. No. 10182-107)

Active Ingredients: Cypermethrin (+)-alpha-cyano-(3-phenoxyphenyl)methyl(+)-cis,trans-3-(2,2-dichloroethenyl)-2,2-dimethylcyclopropanecarboxylate

Dragnet SFR (EPA Reg. No. 279-3062)

Active Ingredients: Permethrin (3-Phenoxyphenyl)methyl(+)-Cis-trans 3-(2,2-dichloroethenyl)-2,2-dimethylcyclopropanecarboxylate

Invader HPX-20 (EPA Reg. No. 9444-204)

Active Ingredients: Propoxur 1%

NOTICE TO OWNER

Under the California Mechanics Lien Law any structural pest control company which 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 or her work or supplies, has a right to enforce a claim against 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 structural pest control company 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." Prime 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.

NOTE: If the Home Owner fails to pay billing in full, APPLE TERMITE INC will have the right to be paid back for all its costs and expenses to the extent not prohibited by applicable law. Those expenses include, for example (but not limited to), reasonable attorney's fees. If for any reason this account is to be turned over to our collection agency, You will be responsible for all cost of collecting.

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

Address 18487 Del Bonita, Rowland Heights, CA

09/30/2010

W8529

Date

Report #

Findings and Recommendations estimated by this Company:

Approval	Item	Primary Estimate	Section
<input type="checkbox"/>	1A	\$425.00	
<input type="checkbox"/>	1B	Included in 1A	
<input type="checkbox"/>	1C	Included in 1A	
<input type="checkbox"/>	7A	Included in 1A	
<input type="checkbox"/>	8A	Included in 1A	
<input type="checkbox"/>	9A	Included in 1A	
<input type="checkbox"/>	9B	\$750.00	
<input type="checkbox"/>	9C	Included in 9B	
<input type="checkbox"/>	11A	Included in 1A	
<input type="checkbox"/>	11B	Included in 9B	
<input type="checkbox"/>	11C	Included in 9B	

Complete all of the above listed items.

Complete all items with Primary Estimate:

Total Estimate \$1,175.00

Complete only the above items checked.

Total \$ _____

I have read and understand the terms of the Report referenced above and agree to the terms and conditions set forth. APPLE TERMITE INC is hereby authorized to complete the items selected above and it is agreed that payment shall be made as follows.

Payment shall be made as follows: With close of Escrow \$ _____ Deposit \$ _____ on Completion

Escrow Number: _____ Escrow Company: _____ Escrow Officer: _____

Phone () _____ - _____ Fax () _____ - _____ Address: _____

Owner or Authorized Representative: Owner Representative's Title: _____

Print Name: _____ X _____ Date _____

Owner or Authorized Representative: Owner Representative's Title: _____

Print Name: _____ X _____ Date _____



Apple Termite
 12025 Florence Ave. Suite 304
 Santa Fe Springs, CA 90670

Office: (562) 942-8100
 Office: (909) 899-6900
 Toll-Free: (888) 942-8144
 Fax: (562) 942 8122
 Email: sales@appletermite.com

Work Authorization

Address: 18487 Del Bonita Rowland Heights, CA
 Report # W8529 Report Date: 09/30/2010
 The terms of this contract are agreed upon as set forth in the above noted report.

Findings and Recommendations estimated by this Company:

Approval	Item	Primary Estimate	Section
<input type="checkbox"/>	1A	\$425.00	
<input type="checkbox"/>	1B	Included in 1A	
<input type="checkbox"/>	1C	Included in 1A	
<input type="checkbox"/>	7A	Included in 1A	
<input type="checkbox"/>	8A	Included in 1A	
<input type="checkbox"/>	9A	Included in 1A	
<input type="checkbox"/>	9B	\$750.00	
<input type="checkbox"/>	9C	Included in 9B	
<input type="checkbox"/>	11A	Included in 1A	
<input type="checkbox"/>	11B	Included in 9B	
<input type="checkbox"/>	11C	Included in 9B	

Complete all of the above listed items. Complete only the above items checked.

Complete all items with Primary Estimate: **Total Estimate \$1,175.00** Total \$ _____

I have read and understand the terms of the Report referenced above and agree to the terms and conditions set forth.

APPLE TERMITE INC is hereby authorized to complete the items selected above and it is agreed that payment shall be made as follows:

Payment shall be made as follows: With close of Escrow \$ _____ Deposit \$ _____ on Completion

Escrow Number: _____ Escrow Company: _____ Escrow Officer: _____

Phone () _____ - _____ Fax () _____ - _____ Address: _____

Owner or Authorized Representative: Owner Representative's Title: _____

Print Name: _____ X _____ Date _____

Owner or Authorized Representative: Owner Representative's Title: _____

Print Name: _____ X _____ Date _____