

Protection Against Termites



Address: _____

Builder: _____

The residence addressed above meets or exceeds the requirements for protection against termites set forth in Section R320 of the 2015 International Residential Code.

Name of Protection Provider: _____
Company

_____ Address

_____ City State Zip Code

_____ State License Number

Notary

I, _____, being duly sworn doth depose and attest that the information contained herein is true and accurate to the best of my knowledge and belief.

Signature

Date

Subscribed and sworn to before me this _____ day of _____, _____.

Notary Public in and for the State of Texas