

Termite Pretreatment Notification

NOTIFICATION OF INTENT TO CONDUCT PRECONSTRUCTION TREATMENTS

PEST CONTROL COMPANY INFORMATION									
						*Date form			
*Company Name:						submitted:			
Contact:						Company Numbe	۵r۰		
contact.						Company Number	٠١،		
E-Mail Address:	ess:					*Phone/Extension:			
Application Details									
Per NAC 555.427 A complete "Termite Pretreatment Notification Form" must be submitted to the Nevada Department of Agriculture before performing a preconstruction treatment.									
Indicate Application details below:									
0 /									
Site (subdivision) Na	ime:								
*Location or address									
(including zip code)									
<u> </u>									
					*Build	der / Contractor			
Major Cross Streets:					Name):):			
*Expected Starting Date:					*Expe	ected bletion Date:			
Expected Starting L	Jate.				COMP	netion bate.		SOIL	
*Number of sites that will								SOIL	
be treated:					*Trea	itment Type:		WOOD	
*Location of NDOA Pre-		\square PLUMBING STUB-OUT \square INSIDE ELECTRICAL PANEL							
treatment Tag" (green) will be placed:			FOUNDATION WALL	П	OTHE	R:			
NDOA USE ONLY									
Date Received:									
Reviewer:									
Comments:									
Form Submission:									

Nevada Department of Agriculture -- 2300 McLeod ST., Las Vegas, NV 89104

Fax 1-702-668-4567

e-mail: pretreat@agri.nv.gov