

# TERMITE INSPECTION REPORT

## EXISTING CONSTRUCTION

1. REALTOR/ESCROW CO.:	2. DATE REPORT PREPARED:	3. ESCROW #:
4. SOLE/ENTITY NAME/ADDRESS (Include ZIP code):     SOLE/ENTITY PCO Lic. No.: _____	5. NAME OF INSPECTOR: _____ (a) PCO/RME Lic. No.: _____ <input type="checkbox"/> BR-1 <input type="checkbox"/> BR-3 (b) PCFR Lic. No.: _____ <input type="checkbox"/> BR-1 <input type="checkbox"/> BR-3 Name of Licensed PCO/RME Supervisor: _____ PCO/RME Lic. No.: _____ <input type="checkbox"/> BR-1 <input type="checkbox"/> BR-3	
6. NAME, ADDRESS AND TELEPHONE NUMBER OF PERSON ORDERING INSPECTION:	8. INSPECTION DATE:	
7. ADDRESS OR LOCATION OF BUILDING OR PROPERTY INSPECTED:	9. (a) DATE OF LAST TREATMENT FOR BUILDING OR PROPERTY INSPECTED: _____ (b) SOURCE OF INFORMATION FOR LAST TREATMENT: _____ (c) WAS SELLER'S DISCLOSURE STATEMENT RECEIVED? <input type="checkbox"/> YES <input type="checkbox"/> NO	
10. SELLER'S/OWNER'S NAME:		
11. BUYER'S NAME:		

## SCOPE OF INSPECTION

12. This report documents the results and scope of an inspection of the above address for the presence of termites. This report does not include identification or detection of microorganisms. This report is made on the basis of a visual inspection of areas which were accessible to the inspector at the time of the inspection. As to such areas which were obstructed, enclosed or concealed from the view of the inspector, or any area of the structure for which inspection may result in damage, removal or defacement of part of the existing structure, this report does not, and should not be construed to present any finding and/or opinion as to the presence or absence of termites. Areas which were obstructed, enclosed or concealed may include the following: fixed ceilings, spaces between double walls, stored articles of personal property, hidden joists or rafters, under and behind floor and wall coverings, floor and wall cabinets, furniture and appliances, including crawl spaces of less than 24" from the bottom of the floor joist to the surface below. The PCO should list in the Report of Findings, those obstructed, enclosed or concealed areas in which no inspection could be conducted.
13. This inspection report is not, and should not be construed as:
- (a) Constituting a guarantee or warranty (implied or expressed) as to the absence of termites in the inspected structure (see Section 460J-19(b), Hawaii Revised Statutes); or
  - (b) Presenting any opinion as to the structural integrity of the building due to termite infestation, or the necessity or cost of repair. If visible damage to the structure(s) is noted below, further investigation by qualified professional construction or engineering persons may be warranted; or
  - (c) Constituting a finding and/or opinion as to the potential for subsequent termite infestation as to accessible or inaccessible areas.

(CONTINUED ON PAGE 2)

Print Name of Licensee: \_\_\_\_\_

Date: \_\_\_\_\_

### SCOPE OF INSPECTION (cont'd)

14. The information contained in this report is considered to be reliable for not more than fifteen (15) days subsequent to the date of inspection. This report shall not be assigned, sold or otherwise transferred to third persons without the express written consent of the Licensee noted above.
15. The above named Licensee shall not be liable or responsible for damages due to subsequent termite infestation in and to areas of the building or property inspected UNLESS the presence of termites in such areas was visible to the inspector at the time of the inspection (Section 460J-19(b), Hawaii Revised Statutes).
16. Other than for inspection purposes, neither the Licensee nor the inspector has now, or contemplates having, any financial, ownership, or possessory interest in the property inspected. Neither Licensee nor inspector is associated with any party to a transaction involving the transfer of an interest in the property.
17. If available, the seller's disclosure statement should be supplied prior to this report.

### REPORT OF FINDINGS

18. **General description of the building or premises inspected** (i.e. residential or commercial; number of buildings, appurtenant structures, etc.)

19. **Were any areas of the building or premises obstructed, enclosed, or otherwise concealed from inspection?**

YES     NO

Describe those areas and state the reasons any accessible area was not inspected.

20. **Was visible evidence of termite infestation observed?**     YES     NO

Due to the cryptic nature of termites it may not be possible to determine conclusively whether or not termites are present simply based on visible evidence of termite infestation. Destructive testing or damage to the premises may be necessary to detect infestations.

(a) Drywood \_\_\_\_\_ Subterranean \_\_\_\_\_

(b) Describe location(s). Also note on a diagram of the building or premises attached to the report.

Print Name of Licensee: \_\_\_\_\_

Date: \_\_\_\_\_

21. **Is further action for control of drywood and/or subterranean termites recommended?**  YES  NO

(a) Recommendations:

(b) **State whether any existing conditions of the premises contain the potential for future termite infestation.**

Examples of some conditions conducive to termite infestation are: earth-to-wood contact, leaking roof, or roof damage, wood debris in crawl space and excessive moisture or water exposure. The PCO does not and cannot advise as to the presence or absence of any other damage to the structure or premises, or in inaccessible areas including, but not limited to retaining walls, hidden (concealed) construction joints, stucco siding below grade, bath traps, plumbing blockouts and penetrations or damage caused by fire, water, rot, moisture, microorganisms, humidity, flood, leaks or storms.

22. **Additional Comments:**

23. **Copies of this report have been provided to:**  Realtor/Escrow  Owner/Seller  Purchaser

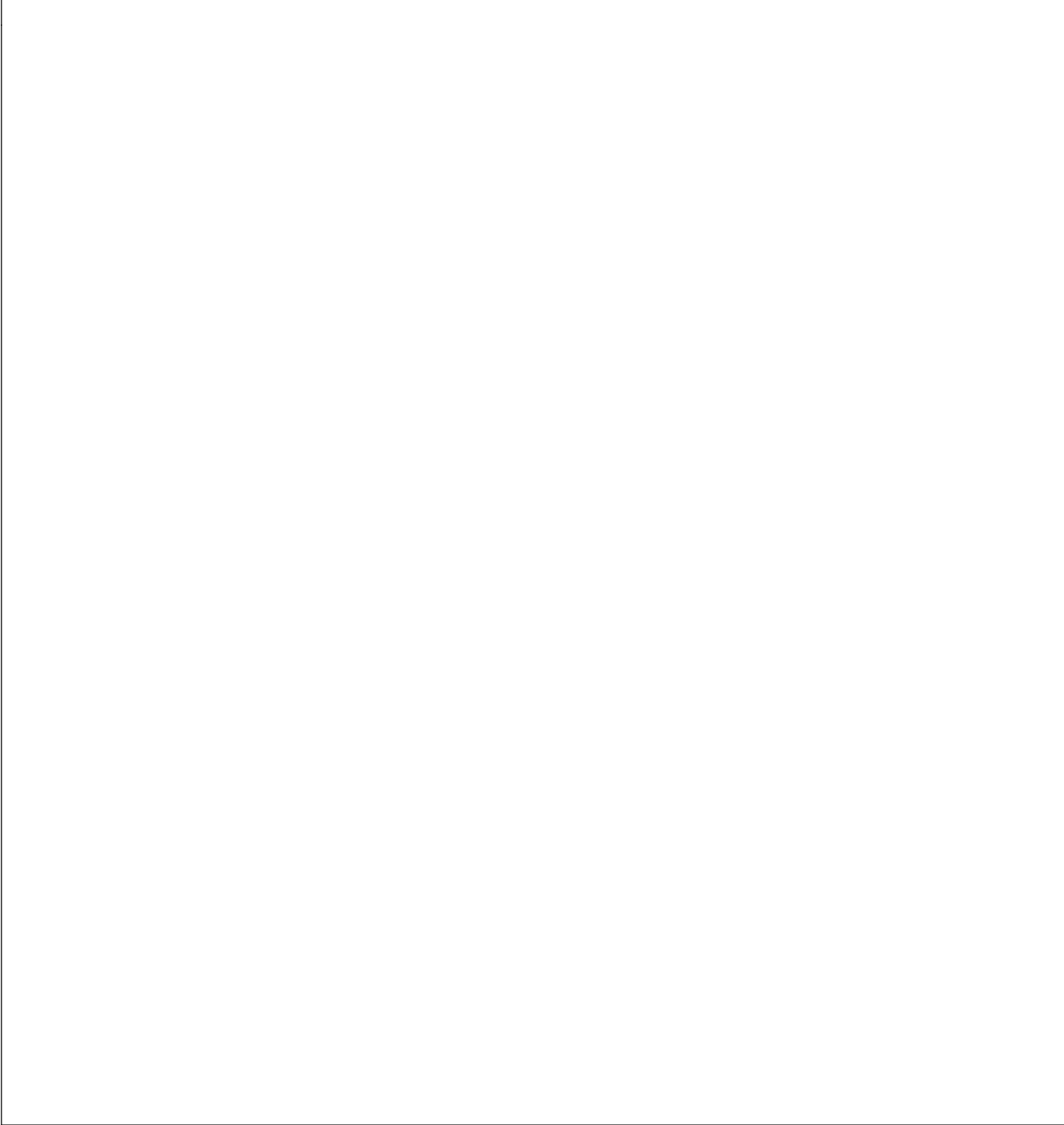
24. \_\_\_\_\_  
Signature of Authorized Licensee PCO/RME Date  
 BR-1 OR  BR-3

Print Name of Licensee: \_\_\_\_\_

Date: \_\_\_\_\_

**DIAGRAM OF STRUCTURE INSPECTED**

Add diagram of structure inspected below. Diagrams typically are not drawn to scale. The diagram should have a description of the building; i.e., 3 bedroom structure, floors, etc. Describe by location on diagram and in writing appropriate areas of infestation.



This material can be made available for individuals with special needs. Please call the Licensing Branch Manager at (808) 586-3000 to submit your request.