



16861 New Road  
Lewes, DE 19958  
302-645-1502

## TERMITE INSPECTION FAX FORM

REALTOR/NAME/BROKERAGE: \_\_\_\_\_ PHONE \_\_\_\_\_

SELLERS NAME: \_\_\_\_\_ PHONE \_\_\_\_\_

PROPERTY ADDRESS: \_\_\_\_\_

SUB-DIVISION NAME: \_\_\_\_\_

BUYERS NAME: \_\_\_\_\_ PHONE \_\_\_\_\_

BUYERS PERMANENT ADDRESS: \_\_\_\_\_

DIRECTIONS TO PROPERTY: \_\_\_\_\_

KEY PICK UP LOCATION: \_\_\_\_\_

PROPERTY OCCUPIED: YES / NO (PLEASE CIRCLE)

IF OCCUPIED CONTACT PERSON: \_\_\_\_\_ PHONE \_\_\_\_\_

SETTLEMENT DATE: \_\_\_\_\_

SPECIAL INSTRUCTIONS: \_\_\_\_\_

ALL OF OUR TECHNICIANS ARE CERTIFIED

PLEASE FAX YOUR REQUEST TO

302-645-4781

OR

EMAIL TO

[activpestandlawn@gmail.com](mailto:activpestandlawn@gmail.com)