



BUILDING DIVISION
120 Malabar Road, S.E., Palm Bay, FL 32907
Phone: (321) 953-8924 • Fax: (321) 953-8925

OWNER/BUILDER TERMITE TREATMENT AFFIDAVIT

Section 1: OWNER/BUILDER INFORMATION

Permit #: _____

NAME: _____
ADDRESS: _____ CITY: _____ ST: _____ ZIP: _____
PHONE: _____

Section 2: SITE LOCATION INFORMATION

PERMIT #: _____ ADDRESS: _____
LOT/BLOCK/UNIT: _____
AREA TREATED (SQUARE FOOTAGE): _____

Section 3: PRE-TREATMENT INFORMATION

DATE OF TREATMENT: _____
AREA TREATED (SQUARE FOOTAGE): _____
CHEMICAL USED: _____ PERCENT CONCENTRATION: _____
NUMBER OF GALLONS USED: _____

Section 4: PERIMETER INFORMATION

DATE OF TREATMENT: _____
AREA TREATED (SQUARE FOOTAGE): _____
CHEMICAL USED: _____ PERCENT CONCENTRATION: _____
NUMBER OF GALLONS USED: _____

The building has received a complete treatment for the prevention of subterranean termites. Treatment is in accordance with rules and laws established by the Florida Department of Agriculture and Consumer Services. (Per the Florida Building Code.)

OWNER/BUILDER SIGNATURE

DATE