

PestMasters Pest Control Service Agreement

Pest Control Office Ft. Myers

Telephone # 239-454-4888

Inspection Date _____

#2136

Service Information

Name Calais Cardon, n. vms
 Address 7064 Pelican Bay Blvd.
 City Naples
 State FL Zip 34108
 Phone (Home) _____ (Work) _____

Billing Information

Name Calais @ Pelican Bay *c/o*
 Address 7064 Pelican Bay Blvd.
 City Naples
 State FL Zip 34108
 Phone (Home) 566-3320 (Work) 784-9680

TERM - This is a one-year agreement automatically renewable unless notified otherwise.

- | | | | |
|---|--|---|-------------------------------------|
| ☐ American Roaches | ☐ Smoky Brown Roaches | ☐ House Ants | ☐ Wasps |
| ☐ Brown Banded Roaches | ☐ Silverfish | ☐ Crazy Ants | ☐ Earwigs |
| ☐ German Roaches | ☐ Ghost Ants | ☐ Carpenter Ants | ☐ Millipedes |
| ☐ Oriental Roaches | ☐ Pharaoh Ants | ☐ Centipedes | |

- | | |
|--|--|
| ☐ Mice/Rats | ☐ Fire Ants |
| ☐ Yellow Jackets/Bees | ☐ Widow Spiders |
| ☐ Indoor Tick Control | ☐ Indoor Flea Control |

Service Type:

Exterior Only Interior on Request ☐ Interior & Exterior ☐

Service Frequency:

Monthly ☐ Bi-Monthly ☒ Quarterly ☐ On Call ☐

This home qualifies for a free termite inspection and preferred customer discount. YES ☐ NO ☐

Standard Service

Special Instructions

Jan	Feb	Mar	Apr
May	Jun	Jul	Aug
Sep	Oct	Nov	Dec

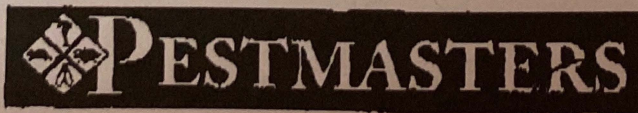
Monitor 18 Rodent Boxes Every other month

Initial Service Charge \$ 125
 Regular Service Charge 125
 Sub-Total Annual Amount 750
 Sales Tax _____
 Total Annual Amount 750
 Amount Remitted with Agreement \$ _____

Credit Card (VISA/MC/AMEX)

Check # _____

Account # _____



John Gail
 Control Representative

4/13/12
 Date

Purchaser

Date

James H. H. 4/16/2012