



TERMITE & PEST CONTROL, INC.

MAIN OFFICE: 7322 WALNUT AVE., BUENA PARK, CA 90620-1760

AUTHORIZATION TO DO WORK

We are enclosing this authorization with your bid in case you would like to have this work done. If you decide to proceed, you would merely complete the following information in the spaces provided and forward to our office. Upon receipt, the work will be scheduled as soon as possible. You will be contacted in advance to set an appointment for the completion of this work.

BE SURE TO COMPLETE ALL OF THE INFORMATION. EVEN IF YOU ARE REQUESTING THE BILL BE SENT TO ESCROW. WE WILL NEED THE PERSONAL INFORMATION ABOUT YOU IN THE EVENT THE ESCROW CANCELS OR CLOSES WITHOUT THE BILL BEING PAID.

IMPORTANT NOTE: If this work is being billed to escrow, the person signing this authorization is assuming responsibility for payment within 30 days if this escrow should be unusually prolonged, closes or is cancelled without payment being made for all costs incurred.

Address of property where work is to be performed: _____

Item Nos. to be completed (refer to rpt): _____

Total cost of work requested: _____

How will we obtain entry to complete work: _____

Phone #: _____ Cell #: _____

BILL TO:

OWNER: Address: _____

City/State/Zip: _____

Place of employment: _____

Work Phone: _____

ESCROW: Name: _____ Escrow #: _____

Address: _____

City/State/Zip: _____

Escrow Phone #: _____ Escrow Officer: _____

SIGNATURE: _____ **DATE:** _____

(If the person signing this authorization is not the owner of the property, please indicate your connection whereby authorization is given)