

Multi-Service Plan

www.insect.com

Purchaser Name(s) Amy McGrath Email Address: akmcgrath@yahoo.com
 Home # _____ Work # _____ Cell # (919) 622-2738
 Mailing Address 745 Catawba St City Raleigh State NC Zip 27609-5643
 Property Address 745 Catawba St City Raleigh State NC Zip 27609-5643
 Description of Structure(s) Covered Single family Location #: 1056947

I elect to purchase the following services from Terminix:

☒ **Termite Control** (☒ Bait ☐ Liquid ☒ Damage Repair ☐ Service Only) (Check primary service and type)
 Initial Cost \$ 865.00 Annual Renewal \$ 370.00 FINANCED? ☐ Yes ☒ No

☒ **Moisture/Insulation Related Services** (only items checked apply)
 Initial Cost \$ 13,393.09 Annual Renewal \$ 330.00 FINANCED? ☐ Yes ☒ No

☐ _____ mil moisture barrier	☐ _____ sq ft of foam board on foundation wall
☒ <u>1,757</u> sq ft of R19 crawl space insulation *Partial non-renewable.	☐ _____ sq ft of R _____ attic insulation
☒ Remove <u>1,757</u> sq ft of crawl space insulation	☐ Remove _____ sq ft of attic insulation
☒ <u>1</u> dehumidifier(s)	☐ _____ sump pump _____ feet of site drain
☐ Liner on foundation wall(s)	☒ Crawl door (non-renewable)
☒ Vent covers (non-renewable)	☐ Gutters ☐ Gutter guards
☐ Other _____ (specify)	☐ _____ IAQ(s) (non-renewable)

☐ **Benefect** (☐ Crawl Space ☐ Attic ☐ Both) FINANCED? ☐ Yes ☐ No
 Initial Cost \$ _____ Annual Renewal \$ _____ (Crawl Space only)

☐ **Bed Bug Service** (☐ PREMIUM ☐ BASIC)
 Initial Cost \$ _____ Extended Warranty \$ _____ (☐ Yes ☐ No) FINANCED? ☐ Yes ☐ No

☒ **Rodent or Preventative Exclusion Service** (☒ Crawl Space Seal ☐ Exterior/Attic Seal ☐ Drip Edge ☒ Sanitation ☒ Clean Up ☐ Other)
 Initial Cost \$ 2,672.51 (Must maintain active pest service with Terminix for warranty.) FINANCED? ☐ Yes ☒ No

☐ **WIOET Service** (☐ Non Decay Fungus ☐ Wood Decay Fungus ☐ Active Beetles ☐ Inactive Beetles)
☐ Curative OR ☐ Preventative
 Initial Cost \$ _____ (non-renewable) FINANCED? ☐ Yes ☐ No

Wildlife Service (See page 18)
☐ Initial Cost \$ _____ Renewal \$ _____ FINANCED? ☐ Yes ☐ No

☐ **Pest Control*** (☐ MONTHLY ☐ BI-MONTHLY ☐ QUARTERLY ☐ ONE TIME)
 Initial Cost \$ _____ Recurring \$ _____ Autopay? ☐ Yes ☐ No

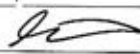
*Monthly and bi-monthly plan requires credit card on file, which will be charged once service is performed.

☐ **Mosquito Control*** (☐ Jan ☐ Feb ☐ March ☐ April ☐ May ☐ June ☐ July ☐ Aug ☐ Sept ☐ Oct ☐ Nov ☐ Dec)
 Initial Cost \$ _____ Recurring \$ _____ *Mosquito requires credit card on file, which will be charged once service is performed.

☐ **Snake Control*** (☐ MONTHLY ☐ BI-MONTHLY ☐ QUARTERLY ☐ ONE TIME)
 Initial Cost \$ _____ Recurring \$ _____ *Snake requires credit card on file, which will be charged once service is performed.

YOU, THE PURCHASER, MAY CANCEL THIS TRANSACTION AT ANY TIME PRIOR TO MIDNIGHT OF THE THIRD BUSINESS DAY AFTER THE DATE OF THIS TRANSACTION BY MAILING A TYPED OR HANDWRITTEN NOTICE OF YOUR INTENT TO CANCEL THIS TRANSACTION TO TERMINIX CUSTOMER SERVICE PO BOX 2587 FAYETTEVILLE NC 28302.

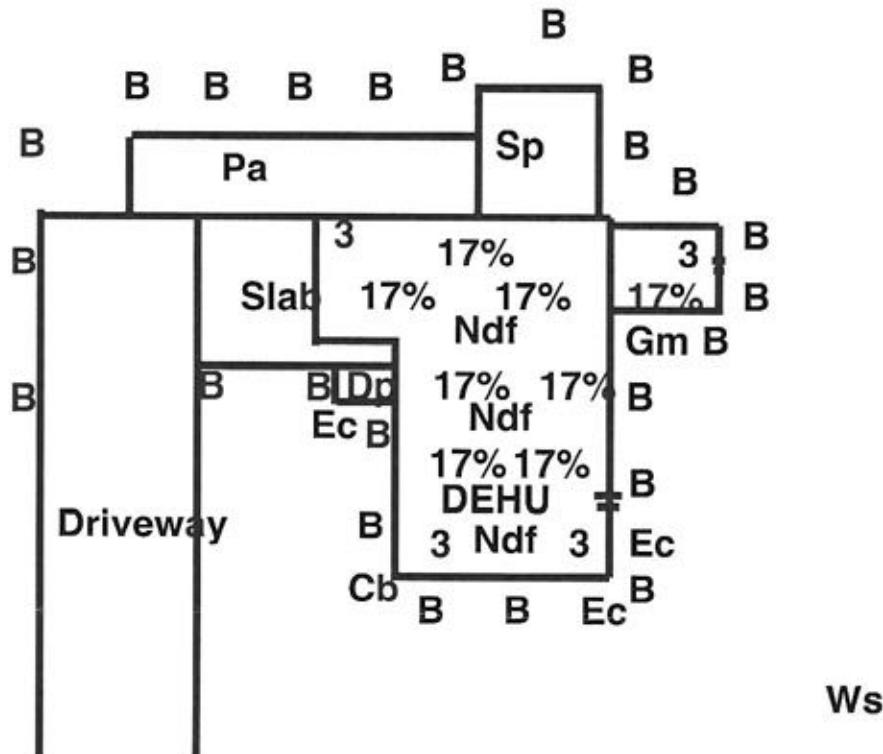
In the event you have any questions, compliments or complaints, you may contact a Terminix representative by calling 1-800-BUGS-911.

Purchaser Signature(s)  Date 3/19/26
 Terminix Representative (signature)  Date 3/26/26
 Terminix Licensee (print name) Alessandro Negro Licensee # 2468PW
 Licensee Address 6020 Oak Forest Dr., Raleigh, NC 27616 Phone # (919) 790-0995

Terminix, as used in this plan, refers to an independent business licensed to serve you by the Terminix International Company, L.P. Updated 10/22/2025 Page 1 of 18

Termite + pest contract: Terminix

Purchaser Name Amy McGrath Location # 1056947
Property Address 745 Catawba St City Raleigh State NC Zip 27609-5643
Square Footage 2,009 Crawl Square Footage 1,757 Lineal Footage 228 Year Built 1960
SCALE: ☐ 1:1 ☒ OTHER 2 : 1
TYPE OF FOUNDATION: ☐ CONCRETE ☒ HOLLOW BLOCK ☐ BRICK ☐ STONE ☐ OTHER _____
PROPERTY HAS A: 1. SUMP PUMP ☐ YES ☒ NO 2. SITE DRAIN ☐ YES ☒ NO
Highest Wood Moisture Content Reading: 17 %



Note "Hazard" Locations on Graph:

- ☒ Cables – power, telephone, television (CB) ☒ Water Shut-off Valve (WS) ☒ Gas Meter (GM)
☐ Sprinkler System Shut-off Valve (SSP) ☐ Exterior Gas BBQ Grill/Fixture (NGF)

KEY TO EVIDENCE OF:

- ☒ EARTH-WOOD CONTACTS = EC
☒ DIRT FILLED PORCH = DP
☐ POSSIBLE HIDDEN DAMAGE = PHD
☒ PATIO = PA
☐ INACCESSIBLE AREAS = IA
☐ CELLULOSE DEBRIS = CD
☐ WELL/CISTERN = W/C
☐ OPEN PORCH = OP

- ☐ ACTIVE SUBTERRANEAN TERMITES = X
☐ WOOD DECAY FUNGUS = WDF
☐ POWDER-POST BEETLES = PPB
☐ WOOD BORING BEETLES = WB
☒ NON DECAY FUNGUS = NDF
☒ PROPOSED BAIT LOCATION = B
☐ MOISTURE > 19% = EM

- ☐ INACTIVE SUBTERRANEAN TERMITES = (X)
☐ EXISTING WOOD DECAY FUNGUS DAMAGE = (WDF)
☐ EXISTING POWDER-POST BEETLE DAMAGE = (PPB)
☐ EXISTING WOOD BORING BEETLE DAMAGE = (WB)
☐ STANDING WATER IN CRAWL SPACE = SW
☐ TERMITE SWARMERS = S
☐ EXISTING MOISTURE DAMAGE = (EM)
☐ EXISTING TERMITE DAMAGE = (TD)

INSPECTOR'S STATEMENT OF VISIBLE DAMAGE

CONTROL TECHNICIAN'S STATEMENT OF VISIBLE DAMAGE

Terminix Rep Signature [Signature] Date: 3/26/26

Termite Tech Signature _____ Date: _____

THE ABOVE GRAPH, AND THE AREAS CONTAINING VISIBLE EVIDENCE OR DAMAGE, HAVE BEEN DESCRIBED TO ME AND ARE AFFIRMED BY ME AS OWNER OR AGENT OF THE ABOVE PROPERTY. I ALSO AFFIRM THAT I UNDERSTAND THAT TERMINIX IS NOT LIABLE FOR HIDDEN DAMAGE WHICH IS CONCEALED, OBSTRUCTED OR INACCESSIBLE TO THE INSPECTOR, AND I AGREE TO THE TERMS AND CONDITIONS GIVEN.

Purchaser Signature: _____ Date: 3/26/26

You will receive a courtesy call/text to confirm the date and time of your initial service.

Prepaid \$ 1,693.07 Due Upon Completion: \$ 15,237.53 Customer Initials AJM
(Do not write credit card information here. Call MSC to process credit card payment.)

Autopay is required for all monthly and bi-monthly services. Customer Initials _____

For termite control service:

**** You must have the HVAC unit turned off if we are performing a liquid termite treatment. ****

For residential pest control/mosquito/residential bed bug service: Most pests normally enter your home from the immediate exterior of your home. Terminix's pest control service can help limit the invasions into your home. Our pest control program will control many different pests that invade your home during different times of the year. Please note that on the one year anniversary of your service, your pest control program will automatically renew.

Initial service: ☐ Inside ☐ Outside ☐ Both Recurring service will be outside service. Our automated dialer will call/text to schedule your regular services at _____.

If the service appointment is inconvenient, simply call/text us back at 1-800-284-7911 and we will gladly reschedule your appointment.

Yard on initial? ☐ Yes ☐ No Yard on recurring? ☐ Yes ☐ No Number of rodent stations included _____

If in VA regions, is service for active rat infestation in the attic? ☐ Yes ☐ No

Is there any flame producing appliance in the crawl space (such as gas or oil furnace, gas hot water heater, etc)? ☐ Yes ☐ No

Average crawl space height is _____ Ln ft for wall liner (if sold): _____ Floor insulation width (if insulation sold) ☐ 16" ☐ 24"

For dehumidifier/sump pump: Is electrician needed? ☐ YES ☐ NO (check one)

Special instructions: Please use the space below to instruct the technician of any information concerning the structure that was agreed upon concerning services (example: location of a dehumidifier, misc. work, vents open/closed, core stations needed, etc.)

Customer has two separate crawlspaces PLEASE BE SURE TO CLOSE ALL GATES BEHIND YOU DOUBLE CHECK

811 is needed _____

Customer makes all of her own financial decisions _____

***If initial service(s) are not performed within 60 days from date of contract, contract will be considered null and void.**

LOCATION ATTRIBUTES		
Check if applies	Attribute	Description
☐	BASEMENT	Basement
☐	CRAWL ALARM	Alarm on Crawl Space Door
☐	FISH POND	Fish Pond
☐	FOOD	Food Handling Location
☐	GARAGE DET	Detached Garage Under Coverage
☐	GARDEN	Vegetable/Herb Garden on Property
☐	GATE	Locked Gate or Fenced Property
☐	INTCRWDR	Interior Crawlspce Door Access
☐	LOCKCRAWL	Locked Crawlspce
☐	P BASEMENT	Partial Basement
☐	PETS	Pets/Animals Inside/Outside
☐	SLAB	Slab

Text Messaging:

I hereby consent to receive text messages from or on behalf of Terminix at the telephone number provided herein. I understand I may revoke consent to receive text messages at any time. I understand that consent is not a condition of purchase. Message and data rates from your cell phone carrier may apply. Text message phone number: _____ Customer signature: _____

Military Status: ☐ I am active duty military. ☒ I am not active duty military.

Payment Options

PURCHASER UNDERSTANDING OF PAYMENT OPTIONS -- Purchaser understands Terminix's available and approved payment options, and indicates, by purchaser's initials below, which payment option is preferred:

____ 1. Financing with down payment, monthly payments and number of payments per installment agreement below. (Financing only available for certain services and to homeowners only.)

AM 2. Initial down payment by cash, check or credit card will be due upon acceptance of this agreement by Terminix, with the remaining balance to be paid upon completion of the initial treatment or installation. (Not applicable for pest control service.)

____ 3. One-time cash, check or credit card payment will be paid upon acceptance of this agreement by Terminix.

____ 4. Net 30. (Residential property owned by commercial company only.)

SM 5. One-time credit card payment will be paid upon completion of the initial treatment. By signing the Card Holder Signature line (below), I, the card holder, am authorizing Terminix to process this one-time credit card payment upon the completion of the initial treatment without further signature or authorization from me. (Fill out section below with signature for this option only)

Credit Card Type: ☐ Mastercard ☐ Visa ☐ Discover ☒ AMEX

Name (as it appears on card) Amy McGrath

Wisetack: ☐ Yes ☐ No If yes, see Total Cash Price amount on page 4.

Card Holder Signature 

(If paying with a credit card, please call 1-800-395-2844 to make payment.)

Fill out following section if financing (Wisetack or Terminix) is preferred option.

Purchaser #1 Employer _____	Annual Income \$ _____	SS# _____
Purchaser #2 Employer _____	Annual Income \$ _____	SS# _____

Read this plan carefully. It allows you, the purchaser, to pay for services you have purchased from Terminix in a series of convenient monthly payments. Each monthly payment includes an amount paid towards services purchased plus a finance charge.

FOR TERMINIX FINANCING ONLY - SERVICES PURCHASED, PAYMENT COMPUTATION

Termite Coverage Plan	\$ _____	Down Payment (☐ cash ☐ check ☐ CC)	B.	\$ _____
Termite Renewal (# of years _____)	\$ _____	Amount Financed (A-B)	C.	\$ _____
Moisture Control/Insulation/Gutters	\$ _____	Number of Monthly Payments	D.	_____
Moisture Renewal (# of years _____)	\$ _____	Annual Percentage Rate	E.	15%
Benefect Service Plan	\$ _____	Finance Factor (from next page)	F.	_____
Benefect Renewal (# of years _____)	\$ _____	Monthly Payment (Cx F)	G.	\$ _____
Wioet Service Plan	\$ _____	Total of Monthly Payments (Dx G)	H.	\$ _____
Bedbug Service Plan	\$ _____	Finance Charge (H-C)	I.	\$ _____
Bedbug Extended Warranty	\$ _____	Deferred Payment Price (A+I)	J.	\$ _____
Exclusion Service	\$ _____			
Wildlife Service	\$ _____			
Wildlife Renewal (# of years _____)	\$ _____			
Total Cash Price	A. \$ _____			

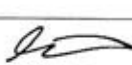
I verify I am the owner of this property at the time of this purchase. _____ (Customer initials)

****I elect to have my finance payments autobilled to my credit card on file each month until paid-in-full.** _____ (Customer initials)

AGREEMENT TO PAY. Terminix has quoted the purchaser a cash price of \$ _____ (A) and a deferred payment price of \$ _____ (J) for the services purchased and the purchaser elects to buy these services for the deferred payment price. The purchaser agrees to pay a down payment of \$ _____ (B) and _____ (D) consecutive monthly payments. The down payment will be paid on the date the contract is signed.

MANAGEMENT APPROVAL. The terms of this plan are subject to review by and the approval of Terminix management. This plan is not effective until such review has occurred and such approval has been given.

CREDIT INVESTIGATION, REPORTING. The process of management review and approval of this plan may include an inquiry by Terminix to a credit reporting agency as to your past credit record. Terminix may also report your payment performance on this plan to a credit reporting agency.

Purchaser Signature(s) <u></u>	Date <u>3/26/26</u>
Terminix Rep Signature <u></u>	Date <u>3/26/26</u>

*See next page for additional finance information.



875 Highway 70 West
Gamer, NC 27529
919-772-3757

SALES ORDER

ORDER # 208713

PAGE 1 LOC 4

DATE 03/14/25

ORDERED BY #76931
AMY MCGRATH
745 CATAWBA ST
RALEIGH, NC 27609

PH1: 919-622-2738 PH2:
EMAIL:AKMCGRATH@GMAIL.COM

ESTIMATED SHIPPING DATE ON 03/20/25

SHIP TO:
AMY MCGRATH
745 CATAWBA ST
RALEIGH, NC 27609

DEL1: 919-622-2738 DEL2:

ALL ITEMS (EXCEPT BEDDING) MAY BE RETURNED WITHIN 2 DAYS OF PURCHASE.
SUBJECT TO A 25% RESTOCK FEE. DEL/INSTALL ARE NON REFUNDABLE. DELIVERY MUST
BE WITHIN 30 DAYS OF SALE DATE. PRICES SUBJECT TO CHANGE IF DELAY IN DEL.

QTY	BRAND	MODEL	SERIAL NUMBER	PRICE	EXTENSION
1	ELE	ELTE7600AW Laundry Tower	LNDRY CTR	1899.00	1,899.00
1	CHRG	A49	DRYER STEAM KIT	30.00	30.00
1	CHRG	A27	WASHER HOSES	25.00	25.00
1	CHRG	A14	NC WHITE TAX	3.00	3.00
1	CHRG	A52	DRYER VENT HOSE	25.00	25.00
1	CHRG	A51	DRYER CORD	25.00	25.00
1	CHRG	A11	A. DELIVERY	100.00	100.00
				SUB TOTAL	2,107.00
				SALES TAX ON \$2,104.00	152.54
				TOTAL ORDER	2,259.54
PAYMENT				03/14/25 MASTERCARD	2,259.54
TOTAL PAYMENTS & FUTURE ASSIGNMENTS					2,259.54
				BALANCE	0.00

COMMENTS:

SALESPERSON: KEVIN ESTES

CUSTOMER SIGNATURE: _____

REV: 0 14:40:18 03/14/25 KE

**Garner Appliance & Mattress**

919-772-3757

Electrolux 600 Series 4.5 Cu. Ft. Washer, 8.0 Cu. Ft. Electric Dryer White Stack Laundry

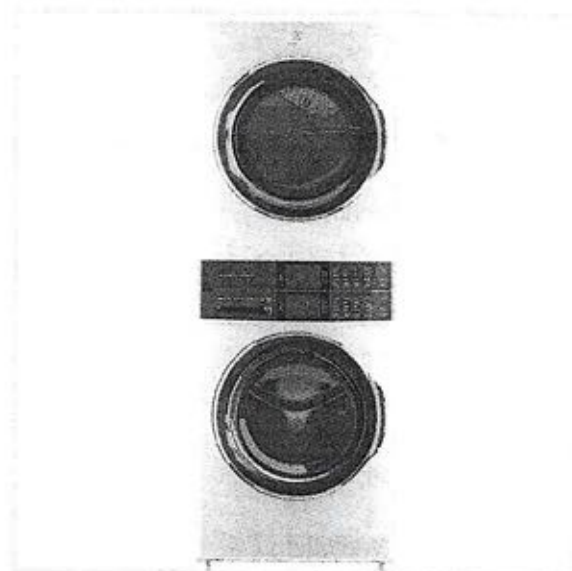
Model #: ELTE7600AW

\$1,899.00**At a Glance**

Full-size and fully integrated front load electric Electrolux Laundry Tower™ features a stacked design that takes up half the floor space, freeing up the laundry room for extra storage, all with an easy to reach control panel. The washer provides the most effective stain removal with SmartBoost® premixing technology.



Proposition 65 Warning for California Residents





641 S New Hope Rd
Raleigh, NC 27610
Fax: 919-863-4402
Phone: 919-865-7777

Install Date 7/9/2025

Job Order 19840951

DAVID TORRES (984) 238-3187

Comfort Advisor: dtorresrivera@ars.com

Name Amy Mcgrath

Street 745 catawba st

City, State, Zip Raleigh 27609

Phone Number 919-622-2738

E Mail Address** Akmcgrath@yahoo.com

Package #1		Package #2	Package #3
Furnace #1	Rheem	Furnace #2	Furnace #3
Coil #1	Rheem RCFY3621STANMC	Coil #2	Coil #3
AC #1	Rheem RA14AY36AJ1NA	AC #2	AC #3
Air Handler #1		Air Handler #2	Air Handler #3
HP #1		HP #2	HP #3
Heat Strip #1		Heat Strip #2	Heat Strip #3
Electric furnace #1		Unit #4	
Mortex ODU #1		Unit #4	
Mortex Coil #1			
Mortex Cabinet #1			

Will be installing 3 ton ac and coil in crawlspace. Seal ductwork to make sure it's not leaking. Install Google nest thermostat

Total Price: \$9,000.00 Deposit \$9,000.00 Balance \$0.00

If you have an outstanding balance on your account, please provide payment to the technicians who have completed the installation of your home comfort system.

Please see your contract for the details and terms of the installation.

If you have any questions or require warranty service of any type, please call:

DAVID TORRES (984) 238-3187 dtorresrivera@ars.com