



**Yearly Pest Control
Service Agreement**

916-333-3738

www.goldenhillspestcontrol.com

Please Print All Information

Home Owner Name

Billing Address

City

State

Zip

Home Phone #:

Work Phone #:

Cell Phone #:

Email:

If Rental Property: Tenant Name

Service Address

City

State

Zip

Home Phone #:

Work Phone #:

Cell Phone #:

Email:

THE SERVICE:

This service will control general pests in your home, along the perimeter of the structure and the reachable eaves. We will also brush down any accessible webs, to help keep spiders away. Any interior pest control services will be done at no additional charge, at a mutually agreeable time. On your scheduled service date, as the weather, temperature, and seasons change, we'll apply the proper materials to your home to control general pests. Flying insects, wood destroying pests and rodents are not covered.

OUR GUARANTEE:

We guarantee to return if pests return between services at NO CHARGE. Outside: All general pests except for pests that infest trees. Inside: Done only if needed on all general pests that can walk in such as Ants, Spiders, Earwigs, Crickets, Sow Bugs, etc. Carried in pests such as Fleas, Pantry Pests and or Roaches are not included.

SERVICE FEES AND DISCOUNT:

*automatic payments with Visa/MasterCard required

Initial Service Fee: \$ _____

Bi-Monthly Service Fee: \$ _____

Discount Amount: \$ _____

Contract Total \$ _____

YOUR FIRST REGULAR BI-MONTHLY SERVICE BEGINS THE MONTH IMMEDIATELY FOLLOWING YOUR INITIAL SERVICE

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

TERMS OF AGREEMENT AND RENEWAL:

THIS AGREEMENT IS EFFECTIVE FOR AN ORIGINAL PERIOD OF UP TO ONE YEAR. After one year, your Pest Control Service will be continued automatically, until cancelled in writing. **A CANCELLATION CHARGE IN THE AMOUNT OF 50% OF THE REMAINING BALANCE OF THE CONTRACT WILL BE CHARGED ON CONTRACTS CANCELLED BEFORE THE END OF THE 12 MONTH (1 YEAR PERIOD).** Payment is due and payable at the time of services rendered. Payments not received within 10 days of service will be charged a \$10.00 late fee. In addition, Customer assumes responsibility for all fees associated with the enforcement of this agreement. It is understood that while the purpose of this service is to prevent damage by pests, Golden Hills Pest Control is not responsible for any damage to property caused by pests. This agreement does not include control for flying insects, termites, or other wood destroying organisms. Service fees apply even when access to part of the property is blocked or inaccessible due to locked gates, guard dogs, construction, etc. **BUT DON'T WORRY, WE GUARANTEE OUR WORK AND WILL TREAT INACCESSIBLE AREAS, BY A MUTUALLY AGREEABLE APPOINTMENT, AT NO CHARGE.**

CUSTOMER ACCEPTANCE

SPECIAL NOTES:

X _____
GOLDEN HILLS REPRESENTATIVE

DATE

X _____
CUSTOMER SIGNATURE

DATE

PESTICIDE NOTICE

DEAR CUSTOMER:

Thank you for selecting Golden Hills Pest Control to perform your pesticide application requirements. Your satisfaction is our goal. We will do everything possible to insure a safe and healthy environment, free of nuisance and disease carrying pests, always with maximum safety to family, pets and property. All pesticides and rodenticides are applied by our trained technicians in a safe and professional manner.

"CAUTION-PESTICIDES ARE TOXIC CHEMICALS.

Structural Pest Control Companies are registered and regulated by the Structural Pest Control Board, and apply pesticides which are registered and approved for use by the California Department of Pesticide Regulation and the United States Environmental Protection Agency. Registration is granted when the state finds that based on existing scientific evidence there are no appreciable risks if proper use conditions are followed or that the risks are outweighed by the benefits. The degree of risk depends upon the degree of exposure, so exposure should be minimized."

CHEMICALS USED: Alpine WSG (dinotefuran) Contrac (bromadiolone) Cy-Kick CS (cyfluthrin), Drione (pyrethrin), Essentria (rosemary oil, geraniol, peppermint oil) Final (brodifacoum), Gentrol IGR (hydroprene), Gentrol Point Source (hydroprene) Maxforce Roach Bait (fipronil), Precor IGR (methoprene), Phantom (chlorfenapyr), Resolv (bromadiolone), Talstar Pro (bifenthrin), Tengard (permethrin), Termidor (fipronil), Microcare 3% (pyrethrins)

If within 24 hours following application, you experience symptoms similar to common seasonal illness comparable to the flu, contact your physician or poison control center (1-800-876-4766) and your pest control company immediately. (This statement shall be modified to any other symptoms of overexposure which are not typical of influenza.)

For further information, contact any of the following:

- Golden Hills Pest Control.....916.333.3738
- Sacramento County Health Department.....916.875.5877
- Placer County Health Department.....530.886.1870
- Sacramento Agricultural Department.....916.875.6603
- Placer County Agricultural Department.....530.889.7372
- Structural Pest Control Board (Regulatory Information)...916.561.8700
- 2005 Evergreen Street, Suite 1500, Sacramento, CA 95815-3831

TERMS AND CONDITIONS

1. FUTURE DAMAGE, LIMITATIONS Of LIABILIT: This agreement does not guarantee against present or future damage to the building or contents, or provide for the repair or replacement thereof. This agreement does not provide for the control of termites, fungus beetles or an other pests not indicated herein.
2. DISCLAIMER: Golden Hills Pest Control’s liability under this agreement will be terminated if Golden Hills Pest Control is prevented from fulfilling its responsibilities under the terms of this agreement by reason of delays in transportation, shortages of fuel and/or materials, strikes, embargoes, fire, floods, quarantine restrictions, earthquakes, hurricanes or any other circumstances beyond the control of Golden Hills Pest Control.
3. ARBITRATION: The purchaser and Golden Hills Pest Control agree that any controversy or claim between them arising out of or relating to this agreement shall be settled exclusively by arbitration. Such arbitration shall be conducted in accordance with the Commercial Arbitration Rules then in force of the American Arbitration Association. The decision of the arbitration shall be a final and binding resolution to the disagreement, which may be entered as a judgement by any court of competent jurisdiction. Neither party shall sue the other where the basis of the suit is this agreement other than for enforcement of the arbitrator’s decision. Neither party shall sue the other where the basis of the suit is this agreement other than for enforcement of the arbitrator’s decision. In no event shall either party be liable to the other for indirect, special or consequential damages or loss of anticipated profits.

LIMITATION OF LIABILITY: Customer expressly waives any claim for monetary damage and/or personal injuries relating to ANY rodent damage. This includes, but is not limited to pests entering or attempted re-entry at different areas of the structure due to treatment methods. Furthermore, customer expressly releases Golden Hills Pest Control from any claim for pest damage, repair and/or injury to others where Golden Hills Pest Control did not commit any negligent, reckless or intentional acts. Customer acknowledges that Golden Hills Pest Control is performing a service and waives any claims for personal or property damage related to the service the company performs.

I agree by accepting this bill that I understand that the company's liability for any and all causes combined shall be no more than \$100,000.00 and I agree to notify the company within one year from date of occurrence. *Call the office for details - 916.333.3738.

THE RIGHT TO CANCEL

The Federal Trade Commission's Cooling-Off Rule, your right to cancel a contract for a full refund extends until midnight on the third business day after the sale (Saturday is considered a business day; Sundays and federal holidays are not). Send a written statement with name and address to Golden Hills Pest Control PO Box 1119 North Highlands CA 95660 or email to Info@ghpc.com

CUSTOMER SIGNATURE _____

DATE _____