Termite Pretreatment Notification

NOTIFICATION OF INTENT TO CONDUCT PRECONSTRUCTION TREATMENTS

PEST CONTROL COMPANY INFORMATION			
*Company Name:		*Date form submitted:	
Contact:		Company Number:	
E-Mail Address:		*Phone/Extension:	

APPLICATION DETAILS

Per NAC 555.427 A complete "Termite Pretreatment Notification Form" must be submitted to the Nevada Department of Agriculture before performing a preconstruction treatment.

Indicate Application details below:

Site (subdivision) Name:			
*Location or address (including zip code)			
Major Cross Streets:		*Builder / Contractor Name:	
*Expected Starting Date:		*Expected Completion Date:	
*Number of sites that will be treated:		*Treatment Type:	☐ SOIL ☐ WOOD
*Location of NDOA Pre-treatment Tag (green) will be placed:	☐ PLUMBING STUB-OUT ☐ FOUNDATION WALL	☐ INSIDE ELECTRICAL PANEL ☐ OTHER: _____	

NDOA USE ONLY

Date Received:	
Reviewer:	
Comments:	

Form Submission:

Clark & Nye Counties – **LAS VEGAS, NV** -- 2300 McLeod ST., Las Vegas, NV 89104 – Fax 1-702-668-4567
e-mail: pretreat@agri.nv.gov

All other Counties – **SPARKS, NV** – 405 S. 21st St., Sparks, NV 89431 – Fax 1-775-353-3713
e-mail: llawrenc@agri.nv.gov

*** = Required Information per NAC 555.427**