

P.O. BOX 2 113 W. IVY STREET
ELLISVILLE, MS 39437

601-477-8757 601-649-BUGS 601-544-4500 1-800-487-0857

MAY 8, 2026

CITY OF LAUREL
401 N. 5TH AVENUE
LAUREL, MS 39440
ATTN: KATIRA HAMMETT

COMPLETE PEST CONTROL SUBMITS A PROPOSAL FOR SENTRICON TERMITE
ELIMINATION SYSTEM AT THE FOLLOWING BUILDINGS:

1. OAK PARK FIELDHOUSE 1035 TAYLOR DRIVE
2. CONCESSION BASEBALL DIXIE MAJORS 1315 WEST DRIVE
3. CONCESSION BASEBALL DIXIE BOYS 1315 WEST DRIVE
4. CONCESSION BASEBALL HOSEY FIELD 1315 WEST DRIVE
5. CONCESSION (2) BOOTS SMITH 2502 AIRPORT DRIVE
6. CONCESSION BLACKCATS 2500 QUEENSBURG AVE.
7. VISITOR'S CENTER 601 LEONTYNE PRICE BLVD.
8. TERRY PADGETT BLDG 10 THAMES DRIVE

FOR THE SUM OF \$10230.00.

RESPECTFULLY SUBMITTED,
COMPLETE PEST CONTROL

THIS CONTRACT DOES NOT PROVIDE FOR THE REPAIR OR REPLACEMENT OF DAMAGE**SERVICE CONTRACT FOR TREATMENT OF WOOD DESTROYING INSECTS
SENTRICON TERMITE COLONY ELIMINATION SYSTEM**

COMPANY **COMPLETE PEST CONTROL** ADDRESS **P.O. BOX 2, ELLISVILLE, MS 39437**
 PHONE **601-477-8757** LICENSE # **115201** CONTRACT DATE **4-6-26**
 CUSTOMER **City of Laurel** CUSTOMER MAILING ADDRESS _____

PROPERTY ADDRESS OF STRUCTURE(S) TREATED

STREET **902 North 9th Avenue**
 CITY **Laurel** STATE **MS** ZIP _____
 STRUCTURE(S) TREATED **One Building**

TREATMENT SPECIFICATIONS

THIS CONTRACT PROVIDES FOR THE TREATMENT AND CONTROL OF:
 SUBTERRANEAN TERMITES A. RETICULITERMES SPP. B. COPTOTERMES-FORMOSAN

GENERAL CONDITIONS:

THIS CONTRACT BETWEEN COMPANY AND CUSTOMER COVERS ONLY THE PRIMARY STRUCTURE LISTED ABOVE. (NO FENCES, DETACHED GARAGES, OUT-BUILDINGS, DECKS, OR OTHER BUILDINGS AT THE ABOVE ADDRESS ARE COVERED BY THIS CONTRACT UNLESS SPECIFIED IN WRITING ON THE FACE OF THIS CONTRACT). FOR THE SUM OF \$ **1400.00**, PLUS TAX OF \$ **98.00**, FOR A TOTAL OF \$ **1498.00**, COMPANY WILL PROVIDE THE NECESSARY SERVICE TO PROTECT THE IDENTIFIED STRUCTURE(S) AGAINST THE INFESTATION OF WOOD DESTROYING INSECTS INDICATED ABOVE.
 THE COMPANY AGREES TO REINSPECT THE ABOVE STRUCTURE(S) BEFORE THE ANNIVERSARY DATE OF THE INITIAL TREATMENT AND ANNUALLY THEREAFTER. IF AT ANY TIME WHILE UNDER CONTRACT AN ACTIVE INFESTATION IS CONFIRMED BY AN EMPLOYEE OF THE COMPANY OR BUREAU OF PLANT INDUSTRY, THE COMPANY WILL REINSPECT AND PROVIDE A REMEDIAL TREATMENT OF THE STRUCTURE(S) AT NO ADDITIONAL COST. CUSTOMER UNDERSTANDS THE COMPANY'S LIABILITY UNDER THIS CONTRACT IS LIMITED TO PROVIDING "REMEDIAL TREATMENT ONLY" AND IN NO WAY, IMPLIED OR OTHERWISE, IS RESPONSIBLE FOR DAMAGES OR REPAIRS TO THE STRUCTURE(S) OR CONTENTS.

THIS CONTRACT REQUIRES A COMPLETED GRAPH OF THE TREATED STRUCTURE(S).

COMPANY AND CUSTOMER AGREE TO THE FOLLOWING TERMS AND CONDITIONS:

1. SELECTION OF TREATMENT: SENTRICON TERMITE COLONY ELIMINATION SYSTEM

COMPANY AGREES TO APPLY TREATMENT TO THE STRUCTURE(S) LISTED ABOVE. SUCH TREATMENT WILL BE IN ACCORDANCE WITH THE DIRECTIONS OF THE MANUFACTURERS OF THE SYSTEM, U.S. EPA APPROVED LABELS AND THE REQUIREMENTS OF FEDERAL AND MISSISSIPPI LAWS AND REGULATIONS.

2. RENEWAL FEE AND INSPECTION

THE COMPANY WILL PERFORM A VISUAL INSPECTION OF THIS STRUCTURE(S) ANNUALLY FOR A FEE OF \$ **300.00**, PLUS TAX OF \$ **21.00**, FOR A TOTAL OF \$ **321.00**. THE INSPECTION WILL BE OF ACCESSIBLE AREAS. THE COMPANY WILL NOT OPEN WALLS, REMOVE FLOOR COVERINGS OR MOVE FURNITURE. THIS CONTRACT WILL RENEW ON AN ANNUAL BASIS UNLESS EITHER PARTY GIVES NOTICE IN PERSON OR BY ATTEMPTED CERTIFIED MAIL, AT LEAST THIRTY (30) DAYS PRIOR TO THE CONTRACT EXPIRATION DATE. THE COMPANY RESERVES THE RIGHT TO ADJUST THE RENEWAL FEE AFTER THE THIRD YEAR. CUSTOMER SHALL HAVE THE RIGHT TO TERMINATE THIS CONTRACT NOTWITHSTANDING THE THIRTY (30) DAY NOTICE REQUIREMENT, UPON RECEIPT OF COMPANY'S NOTICE OF INCREASE IN FEES. THE COMPANY IS ONLY OBLIGATED TO PERFORM UNDER THIS CONTRACT IF THE CUSTOMER ALLOWS COMPANY ACCESS TO THE IDENTIFIED STRUCTURE FOR ANY PURPOSE CONTEMPLATED BY THE CONTRACT, INCLUDING BUT NOT LIMITED TO REINSPECTION, WHETHER THE INSPECTION WAS REQUESTED OR CONSIDERED NECESSARY BY THE CUSTOMER OR REQUIRED BY THE CONTRACT AND REQUESTED OR CONSIDERED NECESSARY BY COMPANY.

3. RENEWAL/CANCELLATION

UPON RENEWAL OF THIS AGREEMENT THE CONTRACTOR AGREES TO INSPECT SAID PROPERTY NOT LESS THAN ONCE ANNUALLY AND TO DO ANY RETREATMENT WORK REQUIRED AT NO FURTHER COST TO THE PURCHASER PROVIDED THERE HAS BEEN NO CHANGE EFFECTING THE STRUCTURE'S TERMITE SUSCEPTIBILITY. EITHER PARTY SHALL HAVE THE RIGHT UPON THE ANNIVERSARY DATE OF THIS CONTRACT TO CANCEL THIS AGREEMENT IN ITS ENTIRETY IN PERSON OR BY ATTEMPTED CERTIFIED MAIL AT LEAST THIRTY (30) DAYS PRIOR TO THE ANNIVERSARY DATE. IF THE CUSTOMER CHOOSES TO TERMINATE THIS CONTRACT, ALL SENTRICON RELATED MATERIALS WILL BE REMOVED BY COMPLETE PEST CONTROL. ALL SENTRICON MATERIALS ARE THE PROPERTY OF CORTEVA.

4. CONDITIONS CONDUCIVE TO INFESTATION

THE CUSTOMER WARRANTS FULL COOPERATION WITH COMPANY DURING THE LIFE OF THIS CONTRACT, AND AGREES TO MAINTAIN THE AREA TREATED FREE FROM ANY FACTOR CONTRIBUTING TO ANY INFESTATION, SUCH AS WOOD, MULCH, TRASH, LUMBER OR DIRECT WOOD SOIL CONTACT ON THE AREA TREATED. CUSTOMER AGREES NOT TO MAKE ANY ALTERATIONS OR ADDITIONS TO THE STRUCTURE WITHOUT NOTIFYING THE CONTRACTOR FOR PROPER TREATMENT TO BE PERFORMED AND AGREES TO ELIMINATE FAULTY PLUMBING, LEAKS, AND DAMPNESS FROM DRAINS, CONDENSATION OR LEAKS FROM THE ROOF OR OTHERWISE INTO, ONTO OR UNDER SAID AREA TREATED. AT NO TIME WILL DAMAGE CAUSED TO ANY PORTION OF THE STRUCTURE, EVEN BY AN ACTIVE

COMPLETE PEST CONTROL - ELLISVILLE, MS (601) 477-8757

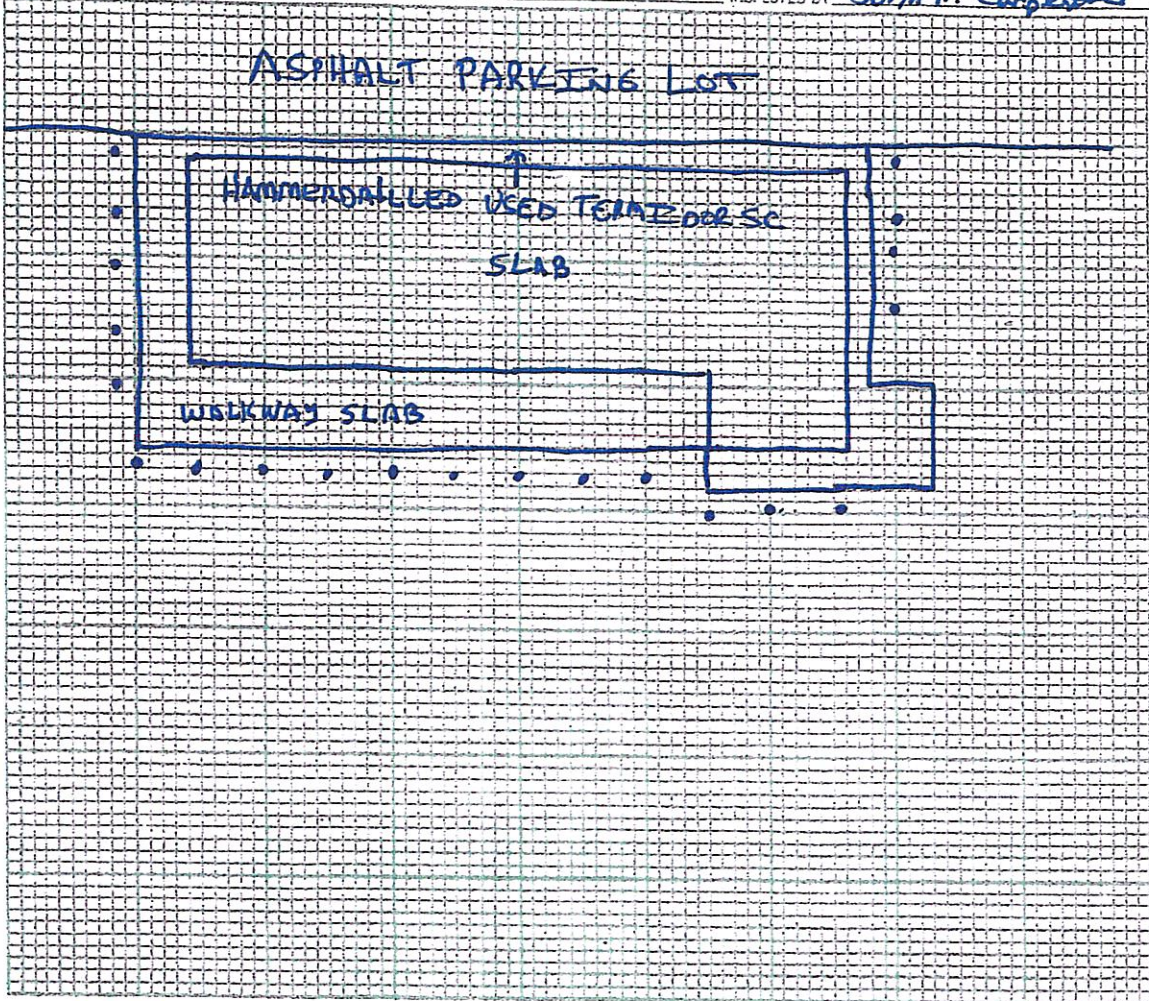
1-800-487-0857 - LICENSE NO. 115201

OWNER'S NAME City of Laurel
 TREATING ADDRESS 902 North 9th Avenue

OCCUPANT Water Dept. DATE 4-6-26
 CITY Laurel STATE MS ZIP _____

BUSINESS PHONE _____ HOME PHONE _____

INSPECTED BY John B. Carpenter




Scale Used: 2 FEET Well: Yes No How close to house? _____
 Additional specifications and comments: 21 stations, 314 LF

L.F. at 4 gal. per 10 L.F. _____ Sq. Ft. _____
 L.F. at 2 gal. per 10 L.F. _____ Traps _____

Type Construction Floating Slab Supported Slab Monolithic Slab Craw Basement

Type Infestation Key	Location Key					Removal Conditions		
	F-Front	R-Right	L-Left	BE-Back	C-Center			
T-Termite Activity	Infested Area					Remove Form Boards?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
D-Drywood Termite Activity	Type					Are termites swimming?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
SY-Suspected Termite Activity	Location					Wood supports on ground?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
P-Powder Post Beetles	<input type="checkbox"/> Joists					Proper Clearance for Treating?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
W-Wood Borers	<input type="checkbox"/> Sub Floor					Make access opening?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
M-Moisture Condition	<input type="checkbox"/> Wall, Studs, Plates					Electricity available?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
X-Damage Present	<input type="checkbox"/> Finished Floor					Gas Trap opening?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
Vertical Drill Location	<input type="checkbox"/> Interior Trim					Wood Sips on ground?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
	<input type="checkbox"/> Paneled Wall					No. of items to remove? <u>0</u>	Treat <u>0</u>	
	<input type="checkbox"/> Door/Window Frame					Shrubbery	Light <input checked="" type="checkbox"/>	Heavy <input type="checkbox"/>
	<input type="checkbox"/> Furniture					No. Vents to install? <u>0</u>		
	<input type="checkbox"/> Attic					Type Floor Covering	<u>CONCRETE</u>	

Co. Representative 

Customer's Signature _____

WOOD DESTROYING INSECT INFESTATION BE THE RESPONSIBILITY OF COMPANY. AT NO TIME WILL THE CUSTOMER REMOVE, TAMPER WITH, OR DISTURB SENTRICON BAIT STATIONS.

5. NON-PAYMENT

CUSTOMER AGREES TO PAY COMPANY'S INVOICES UPON RECEIPT. COMPANY RESERVES THE RIGHT TO TERMINATE THIS CONTRACT IF PAYMENT IS NOT RECEIVED WITHIN THIRTY DAYS OF THE DATE OF INVOICE. IN THE EVENT LEGAL ACTION IS NECESSARY TO COLLECT ANY AMOUNT DUE COMPANY, COMPANY SHALL BE ENTITLED TO RECOVER FROM CUSTOMER ALL REASONABLE COSTS OF COLLECTION, INCLUDING REASONABLE ATTORNEY'S FEES AND EXPENSES, IN ADDITION TO ANY OUTSTANDING AMOUNTS DUE TO COMPANY.

6. DAMAGE

COMPANY SHALL NOT BE RESPONSIBLE FOR (1) ANY PAST OR EXISTING DAMAGE TO THE STRUCTURE(S) OR ITS CONTENTS CAUSED BY WOOD-DESTROYING ORGANISMS OR INSECTS, WHETHER VISIBLE OR HIDDEN; (2) ANY COSTS OR EXPENSES INCURRED BY CUSTOMER AS A RESULT OF SUCH DAMAGE; OR (3) ANY DAMAGE CAUSED BY OR RELATED TO ANY OF THE CONDITIONS DESCRIBED IN PARAGRAPH 4 ABOVE. IF AT ANY TIME DURING THE TERM OF THIS CONTRACT, WOOD DESTROYING INSECTS CHECKED ABOVE APPEAR AND INFEST THIS STRUCTURE(S), COMPANY AGREES TO PROVIDE A REMEDIAL TREATMENT TO THE TREATED STRUCTURE(S) WHILE UNDER CONTRACT WHERE SUCH "ACTIVE" WOOD DESTROYING INSECTS ARE FOUND BY A REPRESENTATIVE OF COMPANY OR BUREAU OF PLANT INDUSTRY. SUCH TREATMENT SHALL BE THE ONLY DUTY OF COMPANY AND SOLE REMEDY OF CUSTOMER. COMPANY SHALL NOT BE LIABLE FOR ANY REPAIRS OR REPLACEMENT OF DAMAGE. THIS CONTRACT DOES NOT COVER EITHER THE REPLACEMENT OR REPAIR OF ANY TERMITE DAMAGE, EITHER PRIOR TO OR FOLLOWING THE TERMITE TREATMENT. THE CONTRACT PROVIDES FOR REMEDIAL TREATMENT ONLY. BECAUSE DAMAGE MAY BE PRESENT IN AREAS WHICH ARE INACCESSIBLE TO A VISUAL INSPECTION, COMPANY DOES NOT GUARANTEE THAT THE DAMAGE DISCLOSED ON THE ATTACHED GRAPH REPRESENTS ALL OF THE EXISTING DAMAGE, AS OF THE DATE OF THIS CONTRACT.

7. ENTIRE CONTRACT

ATTACHMENT(S), IF ANY, TOGETHER WITH CONTRACT SIGNED BY COMPANY AND CUSTOMER AT THE TIME THE CONTRACT IS ENTERED INTO, CONSTITUTES THE ENTIRE CONTRACT BETWEEN THE PARTIES AND NO OTHER REPRESENTATIONS OR STATEMENTS, WHETHER ORAL OR WRITTEN, WILL BE BINDING UPON THE PARTIES.

8. DISCLAIMER

A. COMPANY'S LIABILITY UNDER THIS CONTRACT WILL BE TERMINATED IF COMPANY IS PREVENTED FROM FULFILLING ITS RESPONSIBILITIES UNDER THE TERMS OF THIS CONTRACT BY CIRCUMSTANCES OR CAUSES BEYOND THE CONTROL OF COMPANY.
B. THIS CONTRACT DOES NOT COVER, AND COMPANY WILL NOT BE RESPONSIBLE FOR DAMAGES OF ANY KIND AS SET OUT IN PARAGRAPH ABOVE.
C. COMPANY DISCLAIMS ANY LIABILITY FOR SPECIAL, INCIDENTAL OR CONSEQUENTIAL DAMAGE.
"THERE ARE NO GUARANTEES OR WARRANTIES, EXPRESSED OR IMPLIED, EXCEPT THOSE SPECIFICALLY STATED HEREIN. THERE ARE NO WARRANTIES OR MERCHANTABILITY OR FITNESS FOR A PARTICULAR PURPOSE."

9. BINDING ARBITRATION

IN THE EVENT OF A DISPUTE BETWEEN COMPANY AND CUSTOMER ARISING OUT OF OR RELATING TO THIS CONTRACT, INCLUDING BUT NOT LIMITED TO THE INTERPRETATION OF THE TERMS AND CONDITION OF THIS CONTRACT, THE MAKING OF THE CONTRACT, OR BREACH OF ANY PROVISION OF THE CONTRACT, THE PARTIES HEREBY EXPRESSLY AGREE TO SUBMIT THEIR DISPUTE TO BINDING ARBITRATION FOR RESOLUTION IN ACCORDANCE WITH THE RULES AND REQUIREMENTS OF THE AMERICAN ARBITRATION ASSOCIATION. THE PARTIES ACKNOWLEDGE AND UNDERSTAND THAT BY AGREEING TO SUBMIT THEIR DISPUTE TO BINDING ARBITRATION THEY ARE EFFECTIVELY WAIVING THEIR RIGHT TO TRIAL BY JURY AS A MEANS OF RESOLVING DISPUTES. FURTHERMORE, THE PARTIES ACKNOWLEDGE THAT THEY DESIRE TO ARBITRATE ANY DISPUTE ARISING FROM THIS CONTRACT IN AN EFFORT TO RESOLVE SUCH DISPUTE(S) QUICKLY AND TO AVOID LITIGATION. JUDGEMENT UPON SUCH ARBITRATION AWARD MAY BE ENTERED IN ANY COURT HAVING JURISDICTION.

10. TRANSFERABILITY

THIS CONTRACT SHALL TERMINATE UPON TRANSFER OF OWNERSHIP OF THE DESCRIBED STRUCTURE(S). IF AGREEABLE BY BOTH PARTIES, A NEW CONTRACT MAY BE ISSUED BY COMPANY. THE NEW PURCHASER MUST SIGN A CONTRACT AS PURCHASER AND SIGN A GRAPH SHOWING CONDITION OF STRUCTURE(S) AT TRANSFER, PAY A FEE TO COVER ADMINISTRATIVE COSTS OF TRANSFER. THE EXPIRATION DATE REMAINS THE SAME AS UNDER THE ORIGINAL CONTRACT.

11. CHEMICAL SENSITIVITY

IF CUSTOMER OR OTHER OCCUPANTS OF THE STRUCTURE(S) BELIEVE THEY ARE OR MAY BE SENSITIVE TO PESTICIDES/TERMITICIDES OR THEIR ODORS, CUSTOMER MUST NOTIFY COMPANY IN WRITING, PRIOR TO TREATMENT, INCLUDING WHETHER CUSTOMER OR OTHER OCCUPANTS HAVE CONSULTED WITH A MEDICAL DOCTOR OR OTHER HEALTHCARE PROVIDER REGARDING SUCH SENSITIVITY. COMPANY RESERVES THE RIGHT, UPON RECEIPT OF SUCH NOTIFICATION, TO DENY OR TERMINATE SERVICE. FAILURE TO PROVIDE NOTIFICATION REPRESENTS CUSTOMER'S ASSUMPTION OF RISK AND WAIVER OF ANY CLAIMS AGAINST COMPANY IN CONNECTION WITH SUCH SENSITIVITY.

BY SIGNING THIS CONTRACT, I, THE CUSTOMER, CERTIFY THAT I HAVE READ AND FULLY UNDERSTAND THE PROVISIONS OF THIS CONTRACT, AND THE ATTACHED GRAPH, WITH ALL ITS TERMS AND CONDITIONS WITHOUT LIMITATIONS, AND IT BEING SPECIFICALLY UNDERSTOOD THE COMPANY AND THE UNDERSIGNED ARE BOUND ONLY BY THE TERMS OF THIS CONTRACT AND NOT BY ANY OTHER REPRESENTATION(S) ORAL OR OTHERWISE.

COMPLETE PEST CONTROL

CUSTOMER SIGNATURE

DATE

4-6-26

COMPANY REPRESENTATIVE SIGNATURE

DATE