Bill To

Site

Address

No. 102

Date 2022-01-17

Time In

Time Out

Report : ☑ Daily ☐ Weekly ☐ Bi-Weekly ☐ Monthly ☐ Bi-Monthly ☐ Quarterly ☐ Bi-Yearly ☐ Yearly

AREA OF INSPECTION

☑ Common Area	☐ Playground	☐ Store room	☐ Office/ Pantry/ Room
☐ Apron of Building	☐ Bin Centre/ Chute	☐ Roof Top	☐ Food Outlet
☐ Common corridor	☐ Car Park	☐ Manhole	☐ Kitchen
☐ Landscape/ Garde	☐ Lightning Conductor Pi	☐ Toilet	☐ Cabinet
☐ Drainage	☐ Electrical/ Gas Room	☐ Riser	☐ Gully Trap
☐ Others, Please Specify			

PEST INFESTATION LEVEL

TYPE OF PESTS/ SERVICE	Infestation level		Type of Treatment							Remarks
	Active	Non-Active	F	M	R	B	D	T	O	
☑ Mosquitoes	☑	☑	☑	☑	☑	☑	☑	☑	☑	
☑ Commensal Rodents	☑	☑	☑	☑	☑	☑	☑	☑	☑	
☑ Cockroaches	☑	☑	☑	☑	☑	☑	☑	☑	☑	
☑ Common Ants	☑	☑	☑	☑	☑	☑	☑	☑	☑	
☑ Flies	☑	☑	☑	☑	☑	☑	☑	☑	☑	
☑ Lizards/sniders	☑	☑	☑	☑	☑	☑	☑	☑	☑	
☑ Bedbuas	☑	☑	☑	☑	☑	☑	☑	☑	☑	
☑ Ticks/ Fleas	☑	☑	☑	☑	☑	☑	☑	☑	☑	
☑ Bees/wasos/Hornets	☑	☑	☑	☑	☑	☑	☑	☑	☑	
☑ Snakes	☑	☑	☑	☑	☑	☑	☑	☑	☑	
☑ Subterranean Termites	☑	☑	☑	☑	☑	☑	☑	☑	☑	
☑ Soil/ corrective Treatment	☑	☑	☑	☑	☑	☑	☑	☑	☑	
☑ Termite Baitino svstem	☑	☑	☑	☑	☑	☑	☑	☑	☑	
☑ Light Trap Maintainance	☑	☑	☑	☑	☑	☑	☑	☑	☑	
☑ Others	☑	☑	☑	☑	☑	☑	☑	☑	☑	

* Legend F-Fogging M-Misting R-Residual Spray B- Baits D-Dusting T-Traps O-Others

Scope Of Work:

Technician's Name:

Signature:

Client's Name:

Signature:



Client's Feedback: