EPS MOE Form F4 Report

School: Ngee Ann Secondary School	**Month:** May
Vector Control Technicians/ Workers Names:	**Work Performed**
Azlam Shah Alias,Avinan Avinan,Team member A1,Team member A2,Team member B1,Team member B2,Team member C1,Team member C2,Team member D1,Team member D2,	**Type of Services** / **No of Services Performed**
	Common Pest: 136
	Mosquitoes: 136
	Subterranean Termites: 136
	All Pest: 136

Week	Date of Visit	Checkpoint 1	Checkpoint 2	Checkpoint 3	Checkpoint 4	Checkpoint 5	Checkpoint 6	Checkpoint 7	Checkpoint 8	Checkpoint 9	Checkpoint 10	Checkpoint 11	Checkpoint 12	Checkpoint 13	Checkpoint 14	Checkpoint 15
1st	**2022-05-04**	12:00	12:03	12:06	12:09	12:12	12:15	12:18	12:21	12:24	12:27	12:30	12:33	12:36	12:39	12:42
1st	**2022-05-05**	13:20	13:23	13:26	13:29	13:32	13:35	13:38	13:41	13:44	13:47	13:50	13:53	13:56	13:59	14:02
2nd	**2022-05-10**	12:05	12:08	12:11	12:14	12:17	12:20	12:23	12:26	12:29	12:32	12:35	12:38	12:41	12:44	12:47
2nd	**2022-05-12**	12:01	12:03	12:05	12:07	12:09	12:11	12:13	12:15	12:17	12:19	12:21	12:23	12:25	12:27	12:29
3rd	**2022-05-17**	12:15	12:18	12:21	12:24	12:27	12:30	12:33	12:36	12:39	12:42	12:45	12:48	12:51	12:54	12:57
3rd	**2022-05-19**	10:00	10:03	10:06	10:09	10:12	10:15	10:18	10:21	10:24	10:27	10:30	10:33	10:36	10:39	10:42
4th	**2022-05-23**	13:01	13:03	13:05	13:07	13:09	13:11	13:13	13:15	13:17	13:19	13:21	13:23	13:25	13:27	13:29
4th	**2022-05-26**	15:15	15:18	15:21	15:24	15:27	15:30	15:33	15:36	15:39	15:42	15:45	15:48	15:51	15:54	15:57
5th	**2022-05-30**	12:05	12:08	12:11	12:14	12:17	12:20	12:23	12:26	12:29	12:32	12:35	12:38	12:41	12:44	12:47
5th																
6th																
6th																

Acknowledged by Managing Agent