Pest Control Service Report

Messr	**Mr Raj**	**Service Sheet No.**	**28611**
Area		**Date**	**2022-04-21**
Periodic Task		**Time In**	**10:30**
		Time Out	**11:25**

TYPE OF JOB			
☑ SCHEDULE	☐ SERVICE CALL	☑ ROUTINE WORKS	☐ FOLLOW-UP
☐ TIME SERVICE	☐ OTHERS		

PEST TYPE			
☐ All Pest(Survey)	☑ Ants	☐ Bats	☐ Bees
☐ Beetles	☐ Birds	☐ Cats	☑ Cockroaches
☐ Dogs	☐ Drywood Termites	☐ Fleas	☑ Flies
☐ Hornet	☐ Lice	☐ Mites	☑ Mosquitoes
☑ Rodent	☐ Snake	☑ Subterranean Termites	☐ Wasps
☐ Other Pest(add name)			

OPERATIONS			
☐ ULV	☐ Fogging	☐ Gassing	☑ Handspray
☐ Misting	☐ Soil Treatment	☐ Spot Treatment	☐ Other Control Operation

Location
☑ East Spring Secondary School

Images

Remarks **Indoor treatment been done at the common corridor area,gully trap,visual inspection done checking for any sign of pest activity.Heavy rain during schedule treatment at School**

Name Of Technician **Team member B1**

Customer Signature 

Technician Signature 