EPS
EXPRESS PEST SOLUTIONS
THE PROFESSIONALS

ATALIAN

# PEST MANAGEMENT SERVICE REPORT

NO. 60989

Project Site : FORMER MACPHERSON PRIMARY

Address : 107 CURCUM RD

Date: 04.03.2022

Time In: 1100 HRS

Time Out: 1250 HRS

Blk No. : _____ Unit No.: _____ Postal Code: _____

**Report:** ☐ Weekly ☑ Fortnightly ☐ Monthly ☐ Bi-Monthly
☑ Bi-Weekly ☐ Quarterly ☐ One-time/Ad-hoc ☐ Service Call _____
☐ Follow up _____ ☐ Next Follow up date _____

## AREA OF INSPECTION

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

## PEST INFESTATION STATUS

| TYPE OF PESTS / SERVICE | Infestation Level | | Types of Treatment* | | | | | | | Location / Remarks |
|---|---|---|---|---|---|---|---|---|---|---|
| | Active | Non-Active | F | M | R | B | D | T | O | |
| ☑ Mosquitoes | ☐ | ☑ | ☐ | ☐ | ☑ | ☐ | ☐ | ☐ | ☐ | LARVICIDING CARRIED |
| ☑ Commensal Rodents | ☐ | ☑ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | OUT ACCORDINGLY AT |
| ☑ Cockroaches | ☐ | ☑ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ALL DRAIN TO DETER |
| ☑ Common Ants | ☐ | ☑ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ANY MOSQUITO |
| ☑ Flies | ☐ | ☑ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ACTIVITY. |
| ☐ Lizards/Spiders | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | |
| ☐ Bedbugs | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | |
| ☐ Ticks/Fleas | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | |
| ☐ Bees/Wasps/Hornets | ☐ | ☐ | | | | | | | | |
| ☐ Snakes | ☐ | ☐ | | | | | | | | |
| ☐ Others / | ☐ | ☐ | | | | | | | | |
| ☑ Subterranean Termites | ☐ | ☑ | | | | | | | | |
| ☐ Soil/Corrective Treatment | | | | | | | | | | |
| ☐ Termite Baiting System | | | | | | | | | | ☐ IGS_____ ☐ AGS_____ |
| ☐ Light Trap Maintenance | | | | | | | | | | |

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

**Scope of Work:** _____

**To Improve:** ☐ Housekeeping ☐ Sanitation ☐ Structural Defects ☐ Others _____

Technician's Names : M. SALEH Signature: _____

Client's Name : _____ Signature: TRIB
(company stamp)

Client's Feedback : _____

| Pesticide / Material | Qty |
|---|---|
| | |
| | |
| | |
| | |
| | |

*Disclaimer:* Our Specialist has provided the above recommendations to reduce and eliminate pests' harbourage in your premises. This has to be implemented immediately failing which Express Pest Solutions Pte Ltd will not be held liable for any claims.


**EXPRESS PEST SOLUTIONS PTE LTD**
*(formerly IPM Pest Management Pte Ltd)* Registration No. 200508164C

750D Chai Chee Road #03-06 ESR Bizpark @ Chai Chee Singapore 469004 T. (+65) 6841 4498 vcare.sg.eps@atalianworld.com www.atalian.sg

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# PEST MANAGEMENT SERVICE REPORT

NO. 61318

Project Site : Farmer's Macpherson School

Address : 10-25 Circuit Road

Blk No. : _____ Unit No.: _____ Postal Code: 417529

Date: 18 March 2022

Time In: 17 10 HRS

Time Out: 18 00 HRS

**Report:** ☑ Weekly ☑ Fortnightly ☐ Monthly ☐ Bi-Monthly
☑ Bi-Weekly ☐ Quarterly ☐ One-time/Ad-hoc ☐ Service Call _____
☐ Follow up _____ ☐ Next Follow up date _____

## AREA OF INSPECTION

| | | | | |
|---|---|---|---|---|
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| ☐ Common corridor | ☑ Car Park | ☑ Manhole | ☐ Kitchen | ☐ _____ |
| ☑ Landscape / Garden | ☑ Lightning Conductor Pit | ☐ Toilet | ☐ Cabinet / Racks | ☐ _____ |
| ☑ Drainage | ☐ Electrical / Gas Room | ☑ Riser | ☑ Gully Trap | |

## PEST INFESTATION STATUS

| TYPE OF PESTS / SERVICE | Infestation Level | | Types of Treatment* | | | | | | | Location / Remarks |
|---|---|---|---|---|---|---|---|---|---|---|
| | Active | Non-Active | F | M | R | B | D | T | O | |
| ☑ Mosquitoes | ☐ | ☑ | ☐ | ☐ | ☑ | ☐ | ☐ | ☐ | ☐ | Larviciding carried |
| ☑ Commensal Rodents | ☐ | ☑ | ☐ | ☐ | ☑ | ☐ | ☐ | ☐ | ☐ | out accordingly at |
| ☑ Cockroaches | ☐ | ☑ | ☐ | ☐ | ☑ | ☐ | ☐ | ☐ | ☐ | atr esur ounding ter |
| ☑ Common Ants | ☐ | ☑ | ☐ | ☐ | ☑ | ☐ | ☐ | ☐ | ☐ | cem pound drains in |
| ☑ Flies | ☐ | ☑ | ☐ | ☐ | ☑ | ☐ | ☐ | ☐ | ☐ | to deter mosquito |
| ☐ Lizards/Spiders | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | breeding. |
| ☐ Bedbugs | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | |
| ☐ Ticks/Fleas | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | |
| ☐ Bees/Wasps/Hornets | ☐ | ☐ | | | | | | | | |
| ☐ Snakes | ☐ | ☐ | | | | | | | | |
| ☐ Others / | ☐ | ☐ | | | | | | | | |
| ☐ Subterranean Termites | ☐ | ☑ | | | | | | | | |
| ☐ Soil/Corrective Treatment | | | | | | | | | | |
| ☐ Termite Baiting System | | | | | | | | | | ☐ IGS_____ ☐ AGS_____ |
| ☐ Light Trap Maintenance | | | | | | | | | | |

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**Scope of Work:** _____

**To Improve:** ☑ Housekeeping ☐ Sanitation ☐ Structural Defects ☐ Others _____

To clear dries leaves in school compound

| Pesticide / Material | Qty |
|---|---|
| | |
| | |
| | |
| | |
| | |

Technician's Names : Shuhermen IAIB Signature: _____

Client's Name : _____ Signature: _____ (company stamp)

Client's Feedback : _____

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