Pest Control Service Report Summary

Messr	**MR. Greg**	**Service Sheet No.**	**32863**
Area		**Date**	**2022-05-07**
Periodic Task		**Time In**	**09:48**
		Time Out	**10:30**

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)			

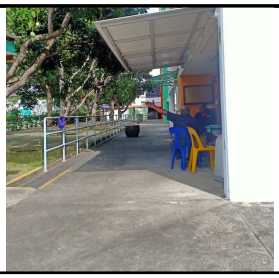
OPERATIONS

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

Location

☑ Former East View Primary School

Images





Remarks **lavaciding done at all drains to deter mosquito activity**

Name Of Technician **Team member A1**

Customer Signature

Technician Signature