Pest Control Service Record

Serv	Se	Servicing Company						
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				Τ				
Date: / /	Supervis				Certification No.			
Time In: Out:	Technic	ian:		Certification No.				
Specific Recommend	ations/A	ctions Needed (See also - ins	pection r	eport)			
Pest Monitoring Report								
Location		Activity Noted			Replacements / Actions			
Pesticide Application Record:								
Pesticide Applied	Ra	te/Amount Applied	Target P	est	Area Tro	eated		

Pest Inspection Report

Service						
Location:						
Exterior						
Pests Present	Sanitation Good		Poor			
Pesis Present			Poor	Perimeter of building; kept free of vegetation, debris, clutter		
□ □ □ □ □ repaired and/or caulked			Exterior/structure; in good repair, windows/doors/screens in good repair, holes and crac			
				Dumpster area; neat, contained, not overflowing, doors closed		
				Loading dock; free of debris, doors closed		
Comments/A	ctionsN	leeded	:			
Kitchen						
				Walls/ceilings; clean, free of grease, mold, etc.		
				Floors; clean including underneath appliances, free of grease residue, food particles		
				Food prep area; sanitary, cleaned daily, no food left out or accessible		
□ food and grease	□ e residue	e, well m	□ naintained	Food processing equipment including ovens, fryers & grills; cleaned frequently, free of		
				Refrigeration units; clean interiors, proper storage containers, no items stored on top/side		
				Dishwashing area; clean, no dirty dishes/utensils left unattended, no leaks/puddles		
Comments/A	ctionsN	leeded	:			
Other						
				Trash area; free of debris, trash properly stored, receptacles frequently cleaned		
				Storage areas; items elevated off the floor, away from the wall, removed from cartons		
				Dining areas; tables/floors clean, free of food debris, condiment/salad bar clean		
				Restrooms; sanitary, floors, sinks, counters clean, no leaking faucets, drains, etc.		
				Classrooms; neat, clutter free, no food stored or left out		
				Locker rooms; clutter free, showers/drains cleaned, no leaks/puddles		
Comments/A	ctions	Needed	d:			
				Date: Next Scheduled Inspection:		
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