



|            |                             |    |                                     |
|------------|-----------------------------|----|-------------------------------------|
| Date       | 07/03/2025                  |    |                                     |
| Order No   | 5310466                     |    |                                     |
| Job Ref    | ROUTINE - 12 VISITS-5310466 |    |                                     |
| Chargeable | Yes                         | No | <input checked="" type="checkbox"/> |

## INSPECTION REPORT

|                  |  |                             |                                     |           |                          |
|------------------|--|-----------------------------|-------------------------------------|-----------|--------------------------|
| Customer         | WB1334 BB Glasgow City Centre / St Enoch | Type of Visit (please tick) |                                     |           |                          |
| Customer Address | Saint Enoch Square, Glasgow G1 4AG       | Routine (enter no.)         | <input checked="" type="checkbox"/> | Call Out  | <input type="checkbox"/> |
|                  |  | Follow Up                   | <input type="checkbox"/>            | Biologist | <input type="checkbox"/> |

|                               |                |               |                          |                 |                          |     |                          |          |                          |
|-------------------------------|----------------|---------------|--------------------------|-----------------|--------------------------|-----|--------------------------|----------|--------------------------|
| Electronic Fly Killer Service | Type of Visit  | Major Service | <input type="checkbox"/> | Routine Service | <input type="checkbox"/> | CTA | <input type="checkbox"/> | Call Out | <input type="checkbox"/> |
|                               | Materials Used |               |                          |                 |                          |     |                          |          |                          |
|                               | Observations   |               |                          |                 |                          |     |                          |          |                          |

|          |      |                          |      |                          |       |                          |     |                          |       |                          |             |                          |       |                          |      |                                     |
|----------|------|--------------------------|------|--------------------------|-------|--------------------------|-----|--------------------------|-------|--------------------------|-------------|--------------------------|-------|--------------------------|------|-------------------------------------|
| Activity | Rats | <input type="checkbox"/> | Mice | <input type="checkbox"/> | Flies | <input type="checkbox"/> | SPI | <input type="checkbox"/> | Birds | <input type="checkbox"/> | Cockroaches | <input type="checkbox"/> | Other | <input type="checkbox"/> | None | <input checked="" type="checkbox"/> |
|----------|------|--------------------------|------|--------------------------|-------|--------------------------|-----|--------------------------|-------|--------------------------|-------------|--------------------------|-------|--------------------------|------|-------------------------------------|

|   |
|---|
| Observations/Actions  |
| Routine pest control 3 carried out all bait points checked and all clear of pest activity at this time of visit |

|                    |                    |             |
|--------------------|--------------------|-------------|
| Rodenticides Usage | Insecticides Usage | Other Usage |
|                    |                    |             |

|                 |           |
|-----------------|-----------|
| Recommendations | Action by |
|-----------------|-----------|

|  |  |
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|  |  |
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|           |                 |               |           |                    |                 |
|-----------|-----------------|---------------|-----------|--------------------|-----------------|
| Report By | Colin Whiteford | Customer Name | bar/block | Customer Signature | Colin Whiteford |
|-----------|-----------------|---------------|-----------|--------------------|-----------------|