

INSPECTION REPORT

Report No	6				
Sheet	\ of \				
Date	26-6-541				
Chargeable	Yes		No		
Job No	5097429				

						JOD IVO	100	1+429
Customer Deemes in					Type of Visit (please tick)			
Customer Address	East KilBride			Routine (enter no.)	Call	Out		
					Follow Up	Biol	ogist	
	Type of Visit	Major Servi	ce Ro	outine Service		СТА	Call	Out
Electronic Fly Killer Materials Used								
Service	Observations							
Activity (please Tick)	Rats Mic	e Flies	SPI	Birds	Cockro	paches	Other	None
Rode	enticides	Usage	Insectic	ides U	sage	Ot	her	Usage
	Completed						mpleted	
Observations/Actions		Recommendations			Action by	Date	Customer Signature	
ROUTIN	e per	T						
CONTRO	5C 1 15R	orla						
was	Carried	647						
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741		Mas						
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OFFICE USE ONLY	Time In	Time Out	Customer Requires				
			Checklist	Summary Sheet	Folder	Specification	
	15.40	16.10	200				