



INSPECTION REPORT

Report No	27/5		
Sheet	1 of 1		
Date	3/9/24		
Chargeable	Yes	<input checked="" type="checkbox"/>	No
Job No	5033902		

Customer	PREMIER INN SITE		Type of Visit (please tick)	
Customer Address	PORTLETHEN		Routine (enter no.)	<input checked="" type="checkbox"/> 5
	ABERDEEN		Follow Up	<input type="checkbox"/>
			Call Out	<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 (please Tick)	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"/>
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Rodenticides	Usage	Insecticides	Usage	Other	Usage

Observations/Actions	Recommendations	Action by	Completed	
			Date	Customer Signature
A ROUTINE SITE INSPECTION HAS BEEN CARRIED OUT TODAY.				
NO CURRENT PEST INFESTATIONS WERE FOUND OR REPORTED AT THIS TIME.				
Report By	J WEEZEN	Customer Name	RYAN THOMSON	Customer Signature
				<i>[Signature]</i>

OFFICE USE ONLY	Time In	Time Out	Customer Requires			
			Checklist	Summary Sheet	Folder	Specification