

Pest Complaint Document

Date:

Name:

Location of Pest Problem: i.e. room number and location in room

Pest Identified:

Note: This filled out document must be kept in the school's IPM Coordinators files as part of the Texas Structural Pest Control records!!!

Scan and email complaint to Don Flippin, IPM Coordinator, at dflippin@haskell.esc14.net

No complaints will be processed unless the form is emailed. Documentation is required.

Pest Control firm to fill out bottom portion.

Action taken as a result of pest problem:

_____ Place blue boards

_____ Apply baits (_____)

_____ Apply pesticide (_____)

_____ Other (_____)

Note: Fill out Yellow/Red List products sheet as needed.

IPM Coordinator: _____ Date: _____