## Form 5: PEST CONTROL RECORD

**Date: Checked By:**

|  |  |  |  |
| --- | --- | --- | --- |
| **Bait Station #** | **Checked By** | **Comment**  (e.g. Bait untouched, nibbled, gone and action taken) | **Sign** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
| **Flying Insect Control Unit (FICU) #1** |  |  |  |
| **Flying Insect Control Unit (FICU) #2** |  |  |  |
|  |  |  |  |