



# EcoWise IPM Site Plan & Treatment Record Form

**Instructions:** Use this form to document your 20 IPM service visits for at least 7 customer sites before you schedule an office visit with the EcoWise Inspector. Use a separate form for each customer site.

Date of Initial Inspection \_\_\_\_\_ Certified IPM Practitioner completing form \_\_\_\_\_

Pest Control Co. \_\_\_\_\_ Customer Site \_\_\_\_\_

Commercial  Residential  Other \_\_\_\_\_

## Inspection

Customer interviewed for history of pest problem(s) & information recorded

Site inspected and pest(s) identified: Target Pest(s): \_\_\_\_\_

Conducive conditions recorded  Discussed findings with customer

Discussed tolerance levels with customer. Describe customer's tolerance level for each pest: \_\_\_\_\_

## Prevention Recommendations

Customer Responsibilities (use codes on reverse)	PMP Responsibilities (use codes on reverse)
1. To limit availability of food:	1. To limit availability of food:
2. To limit availability of habitat:	2. To limit availability of habitat:
3. To limit access to structure:	3. To limit access to structure:

Initial Treatment to directly suppress pest: \_\_\_\_\_

## Treatment Record

Date	Treatment Site (use codes on reverse)	Treatment Method (use codes on reverse)	Equipment Used (use codes on reverse)	Product		Check if not on Program List	Quantity (# of devices or amt. of concentrate—specify measure: oz., lbs. pt., qt. gal.)
				Product Name	EPA/CA Reg. #		
						<input type="checkbox"/>	
						<input type="checkbox"/>	
						<input type="checkbox"/>	
						<input type="checkbox"/>	
						<input type="checkbox"/>	

Information about pest/treatment communicated to/left with customer: \_\_\_\_\_

Describe method of evaluating and monitoring the success of the IPM plan & customer satisfaction \_\_\_\_\_



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**Prevention/Treatment Choices** (Choose from items below; write letter code in space on reverse side)

1. TO LIMIT FOOD	2. TO LIMIT HABITAT	3. TO LIMIT ACCESS
a. Improve general cleanliness b. Vacuum and/or mop floors c. Store food (including pet food and bird seed) in pest-proof containers or in refrigerator d. Remove or seal up garbage at night. e. Clean garbage cans/garbage area f. Clean recyclables before storing g. Clean recycling area h. Keep tight-fitting lids on garbage cans and dumpsters when not in use and at night i. Remove and clean pet dishes after pets eat j. Treat, trim or remove vegetation with honeydew producing insects (aphids, scales, mealybugs) k. Remove pet droppings outside l. Clean up fallen fruit and nuts outside m. Clean up spilled bird seed around feeders  x. Other _____ y. Other _____ z. Other _____	a. Move wood piles away from structure b. Remove brush and/or rock piles c. Eliminate areas of excessive moisture d. Fix plumbing and irrigation leaks e. Seal up cracks and crevices f. Bring order to storage areas g. Eliminate clutter, esp. near sinks, stoves & refrigerators h. Eliminate long expanses of dense, ground cover i. Trim tree and shrub branches 3' to 6' away from structure—leave a clean border around foundation j. Remove standing water k. Remove debris from gutters l. Remove debris from roof  x. Other _____ y. Other _____ z. Other _____	a. Seal holes in structure outside b. Seal holes in structure inside c. Trim tree and shrub branches 3' to 6' away from structure—leave a clean border around foundation d. Weatherstrip doors and/or windows e. Add screens f. Repair screens g. Add door sweeps or otherwise fix gaps under doors h. Add kickplates i. Seal HVAC units j. Cover air vents with 1/4" hardware cloth  x. Other _____ y. Other _____ z. Other _____

SITE = Site where treatment applied	METHOD = Treatment method used	EQUIPMENT = Equip. used for chemical appl.
<b>RESIDENTIAL</b> 1. Kitchen 2. Living Room 3. Bathrooms 4. Bedrooms 5. Dining room 6. Den 7. Utility room 8. Basement/crawl space 9. Outside 10. Attic 11. Roof/gutters  IDENTIFY OTHER AREAS NOT LISTED 12. _____ 13. _____ 14. _____	<b>NON-CHEMICAL</b> 50. Inspection only 51. General cleaning 52. Vacuuming 53. Steam cleaning 54. Pest exclusion work 55. Insect sticky trap placement 56. Snap trap placement 57. Multiple-catch trap placement 58. Glue board placement 59. Live trap placement 60. Rodent monitoring block/non-toxic tracking powder placement  61. Other _____ 62. Other _____ 63. Other _____ 64. Other _____	200. Insect bait station 201. Hand duster 202. Power duster 203. Insect bait applicator 204. Aerosol can 202. Paint brush application 203. Compressed sprayer 204. ULV machine 205. Rodent bait station  206. Other _____ 207. Other _____ 208. Other _____ 209. Other _____ 300. Power sprayer
<b>COMMERCIAL</b> 20. Product areas 21. Rest rooms 22. Storage 23. Offices 24. Classrooms 25. Meeting rooms 26. Areas occupied by people 27. Food consumption areas 28. Food prep areas 29. Recreation 30. Dumpster 31. Exterior 32. Basement or crawl space  IDENTIFY OTHER AREAS NOT LISTED 33. _____ 34. _____ 35. _____	<b>CHEMICAL</b> 70. Insect bait placement 71. Void treatment 72. Treatment to other inaccessible area 73. Treatment to area humans would not normally contact 74. Spot treatment <u>outdoors</u> (2ft. sq. max.) 75. Rodenticide placement  76. Other _____ 77. Other _____ 78. Other _____ 79. Other _____  100. Method not allowed in the <i>Standards</i> and requiring Notice of Deviation. Describe: _____ _____	