



PROFESSIONALS IN PEST CONTROL SERVICES  
COMMERCIAL & RESIDENTIAL  
LES PROFESSIONNELS EN SERVICE D'EXTERMINATION  
COMMERCIAL & RÉSIDENTIEL

## Inspection Report

Inspection for room: \_\_\_\_\_ Date: \_\_\_\_\_

Reason for inspection: \_\_\_\_\_

Inspected by: \_\_\_\_\_

### Areas Checked:

- Mattress
- Under bed
- Linens
- Carpet
- Curtains/Sheers
- Bathroom
- Closet
- T.V. Stand
- Other furniture, please specify \_\_\_\_\_

### Findings:

- No evidence of activity, past or present
- Evidence of present activity
- Evidence of past activity

Details: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Certified Technician: \_\_\_\_\_

Signature: \_\_\_\_\_