



Sample Commercial Pesticide Recordkeeping Form (structural)

Licensed Applicator: _____ Trained Serviceperson, if applicable: _____

Customer Name & Address: _____

Date	Principle Pest to be Controlled	Location of Treatment & Method	Product Brand Name & EPA Reg # (see Key)	Total Amt. of Each Product Used	Application Rate of Each Product Used	Total Volume (if diluted)	Start Time/End Time

Note: Attach drawing of structure's foot print for termite application.

KEY:
Product & Registration #
1.
2.
3.
4.