

STANDARD STRUCTURAL FUMIGATION LOG

ADDRESS OF PROPERTY		CITY	DATE OF FUMIGATION	
PRIME CONTRACTOR NAME AND ADDRESS		SUBCONTRACTOR NAME AND ADDRESS (if applicable)		
OWNER/AGENT NAME AND ADDRESS		FIRE DEPT. NOTIFIED (DATE) (HOUR)		
PROPERTY DESCRIPTION		C.A.C. NOTIFIED (METHOD)(DATE)(HOUR)		
NOTES / COMMENTS				
SECTION 1 – FUMIGANT RELEASED				
TARGET PEST		WARNING AGENT	CUBIC FEET	OUNCES USED
FUMIGANT / E.P.A. REGISTRATION NO.		SEALING METHOD		DATE/TIME GAS INTRODUCED
		CYLINDER SERIAL NO.	WT. BEFORE INTRO.	POUNDS APPLIED
WIND M.P.H. AIR TEMP		CYLINDER SERIAL NO.	WT. BEFORE INTRO.	POUNDS APPLIED
		CYLINDER SERIAL NO.	WT. BEFORE INTRO.	POUNDS APPLIED
EXTRAORDINARY PRECAUTIONS			TOTAL POUNDS	
[] FUMIGUIDE B [] FUMIGUIDE Y [] VIKANE CALCULATOR [] FUMICALC CALCULATOR [] OTHER _____				
DOSAGE FACTOR _____		UNDER SEAL _____		
TARP CONDITION _____		TEMPERATURE _____		
SEAL CONDITION _____		HOURS EXPOSURE _____		
WIND (MPH) _____		MONITOR JOB (YES / NO) _____		
VOLUME _____				
CREW MEMBER(S) FULL NAME(S): _____ _____ _____ _____ _____ _____				
WAS REQUIRED SAFETY EQUIP. PROVIDED? YES () NO ()		LICENSEE RELEASING FUMIGANT SIGNATURE LICENSE NO.		
SECTION 2 – VENTILATION COMMENCED				
AERATION COMMENCED: DATE TIME		TARP / SEAL CONDITION		
CREW MEMBER(S) FULL NAME(S): _____ _____				
WAS REQUIRED SAFETY EQUIP. PROVIDED? YES () NO ()		LICENSEE COMMENCING VENTILATION SIGNATURE LICENSE NO.		
SECTION 3 – RELEASED FOR OCCUPANCY				
TESTING DEVICE USED:		PROPERTY CERTIFIED SAFE FOR RE-ENTRY: DATE TIME		
CREW MEMBER(S) FULL NAME(S): _____ _____ _____ _____ _____				
WAS REQUIRED SAFETY EQUIP. PROVIDED? YES () NO ()		LICENSEE RELEASING PROPERTY FOR OCCUPANCY SIGNATURE LICENSE NO.		