



## Pest Equipment Verification Checklist

Verify that every piece of pest control equipment is present, numbered, secure and functioning.

|                  |  |            |  |
|------------------|--|------------|--|
| Facility / Site: |  | Date:      |  |
| Completed by:    |  | Signature: |  |

| Device no. | Type (bait/ILT/monitor) | Present (Y/N) | Secure / tamper-resistant (Y/N) | Functioning (Y/N) | Notes |
|------------|-------------------------|---------------|---------------------------------|-------------------|-------|
|            |                         |               |                                 |                   |       |
|            |                         |               |                                 |                   |       |
|            |                         |               |                                 |                   |       |
|            |                         |               |                                 |                   |       |
|            |                         |               |                                 |                   |       |
|            |                         |               |                                 |                   |       |
|            |                         |               |                                 |                   |       |
|            |                         |               |                                 |                   |       |
|            |                         |               |                                 |                   |       |
|            |                         |               |                                 |                   |       |
|            |                         |               |                                 |                   |       |
|            |                         |               |                                 |                   |       |
|            |                         |               |                                 |                   |       |
|            |                         |               |                                 |                   |       |
|            |                         |               |                                 |                   |       |