

MONTHLY REPORT OF WOOD DESTROYING INSECT CONTROL WORK

MAIL, FAX OR E-MAIL TO: MISSISSIPPI DEPARTMENT OF AGRICULTURE AND COMMERCE
 BUREAU OF PLANT INDUSTRY
 P.O. BOX 5207
 MISSISSIPPI STATE, MS 39762
 FAX # 662-325-0397

E-MAIL monthlyreports@mdac.ms.gov

**FOR BUREAU USE ONLY
 ASSIGNED TO DISTRICT#**

COMPANY NAME _____

PHYSICAL ADDRESS _____ CITY _____, ST _____

REPORT FOR WORK PERFORMED IN MONTH OF _____, 20__ LICENSEE SIGNATURE _____

These reports must be mailed, faxed or e-mailed monthly, not later than the 20th of the month for work performed during the previous calendar month. If no treatments are performed during month, write “NO WORK” on this form. You must maintain in your files, records of all pesticides applied. The technician work sheet for calculating termiticide applications is available https://www.mdac.ms.gov/wp-content/uploads/bpi_regpro_termite_tech.pdf and may be helpful in recording the required information and maintaining records. An inventory of products applied as termiticides in Mississippi must be provided. Use table below.

BRAND NAME OF TERMITICIDE IN INVENTORY	FORMULATION	CONCENTRATE AMOUNT BEGINNING OF MONTH	CONCENTRATE AMOUNT USED DURING MONTH	CONCENTRATE AMOUNT PURCHASED DURING MONTH	CONCENTRATE AMOUNT END OF MONTH

List on this report all properties treated for wood destroying insects (i.e. termites, wood boring beetles, carpenter bees, carpenter ants, etc.) This report must be accurate, legible and include all termiticide applications including baits. This includes horizontal and vertical barrier treatments on pre-treatments, treatment on existing structures, spot treatments and retreatments. If application rate and volume are adjusted for soil compaction or for other reasons as the label allows, indicate on this form. **Only those properties treated for prevention and control of subterranean termites must include application volumes.**

CUSTOMER NAME PHYSICAL ADDRESS OF PROPERTY AND CITY OR CONTRACTOR/PROPERTY OWNER NAME SUBDIVISION NAME, LOT NUMBER, AND CITY	DATE OF TREATMENT	USE ABBREVIATION FOR TYPE OF TREATMENT B = BAIT CA = CARPENTER ANTS CB = CARPENTER BEES EP/IST = IMIDACLOPRID EP/IST EP/LI = FIPRONIL EP/LI ET = EXISTING/POST CONSTRUCTION P = PERIMETER FINAL GRADE ON PRE-TREAT PT = PRE-CONSTRUCTION R = RETREAT / EXISTING CONTRACT S = SPOT WBB = WOOD BORING BEETLES WT = WOOD TREATMENT TERMITE	PRE-CONSTRUCTION OR PRE-TREAT PERIMETER FINAL GRADE OR WOOD TREATMENT TERMITE ONLY		EXISTING/POST CONSTRUCTION OR RETREAT/EXISTING CONTRACT OR SPOT TERMITE ONLY		DILUTE PESTICIDE APPLIED OR TERMITE BAIT INSTALLATION		STRUCTURE SPECIFY TYPE
		HORIZONTAL BARRIER TREATED (SQ. FT.)	VERTICAL BARRIER TREATED (LINEAR FT.)	LINEAR FT. TREATED @ 4 GAL PER 10 LINEAR FT.	LINEAR FT. TREATED @ 2 GAL PER 10 LINEAR FT.	PESTICIDE BRAND NAME AND PERCENT FINISHED SOLUTION OR BAITING SYSTEM BRAND NAME	TOTAL GAL. APPLIED FOR TREATMENT (TERMITE) OR # OF BAIT STATIONS INSTALLED	C = CRAWL SLAB: M = MONO S = SUPPORTED F = FLOATING OTHER: CO = COMBO B = BASEMENT	

CUSTOMER NAME PHYSICAL ADDRESS OF PROPERTY AND CITY OR CONTRACTOR/PROPERTY OWNER NAME SUBDIVISION NAME, LOT NUMBER, AND CITY	DATE OF TREATMENT	USE ABBREVIATION FOR TYPE OF TREATMENT B = BAIT CA = CARPENTER ANTS CB = CARPENTER BEES EP/IST = IMIDACLOPRID EP/IST EP/LI = FIPRONIL EP/LI ET = EXISTING/POST CONSTRUCTION P = PERIMETER FINAL GRADE ON PRE-TREAT PT = PRE-CONSTRUCTION R = RETREAT / EXISTING CONTRACT S = SPOT WBB = WOOD BORING BEETLES WT = WOOD TREATMENT TERMITE	PRE-CONSTRUCTION OR PRE-TREAT PERIMETER FINAL GRADE OR WOOD TREATMENT TERMITE ONLY		EXISTING/POST CONSTRUCTION OR RETREAT/EXISTING CONTRACT OR SPOT TERMITE ONLY		DILUTE PESTICIDE APPLIED OR TERMITE BAIT INSTALLATION		STRUCTURE SPECIFY TYPE C = CRAWL SLAB: M = MONO S = SUPPORTED F = FLOATING OTHER: CO = COMBO B = BASEMENT
			HORIZONTAL BARRIER TREATED (SQ. FT.)	VERTICAL BARRIER TREATED (LINEAR FT.)	LINEAR FT. TREATED @ 4 GAL PER 10 LINEAR FT.	LINEAR FT. TREATED @ 2 GAL PER 10 LINEAR FT.	PESTICIDE BRAND NAME AND PERCENT FINISHED SOLUTION OR BAITING SYSTEM BRAND NAME	TOTAL GAL. APPLIED FOR TREATMENT (TERMITE) OR # OF BAIT STATIONS INSTALLED	

CUSTOMER NAME PHYSICAL ADDRESS OF PROPERTY AND CITY OR CONTRACTOR/PROPERTY OWNER NAME SUBDIVISION NAME, LOT NUMBER, AND CITY	DATE OF TREATMENT	USE ABBREVIATION FOR TYPE OF TREATMENT B = BAIT CA = CARPENTER ANTS CB = CARPENTER BEES EP/IST = IMIDACLOPRID EP/IST EP/LI = FIPRONIL EP/LI ET = EXISTING/POST CONSTRUCTION P = PERIMETER FINAL GRADE ON PRE-TREAT PT = PRE-CONSTRUCTION R = RETREAT / EXISTING CONTRACT S = SPOT WBB = WOOD BORING BEETLES WT = WOOD TREATMENT TERMITE	PRE-CONSTRUCTION OR PRE-TREAT PERIMETER FINAL GRADE OR WOOD TREATMENT TERMITE ONLY		EXISTING/POST CONSTRUCTION OR RETREAT/EXISTING CONTRACT OR SPOT TERMITE ONLY		DILUTE PESTICIDE APPLIED OR TERMITE BAIT INSTALLATION		STRUCTURE SPECIFY TYPE
			HORIZONTAL BARRIER TREATED (SQ. FT.)	VERTICAL BARRIER TREATED (LINEAR FT.)	LINEAR FT. TREATED @ 4 GAL PER 10 LINEAR FT.	LINEAR FT. TREATED @ 2 GAL PER 10 LINEAR FT.	PESTICIDE BRAND NAME AND PERCENT FINISHED SOLUTION OR BAITING SYSTEM BRAND NAME	TOTAL GAL. APPLIED FOR TREATMENT (TERMITE) OR # OF BAIT STATIONS INSTALLED	C = CRAWL SLAB: M = MONO S = SUPPORTED F = FLOATING OTHER: CO = COMBO B = BASEMENT