



CHARLES H. BRONSON
COMMISSIONER

Florida Department of Agriculture and Consumer Services
Division of Agricultural Environmental Services

**NOTICE OF INSPECTION
PEST CONTROL SERVICE VEHICLE INSPECTION**

Section 482.091, 482.2265(2), F.S.

(COMPANY) (LICENSE NO.) (DATE)

(BUSINESS ADDRESS) (CITY) (COUNTY) (ZIPCODE)

(NAME OF INDIVIDUAL) (YEAR/MAKE/MODEL OF VEHICLE) (COLOR) (TAG #)

		YES	NO	N/A
1.	ID Card Valid with photo and signature? (482.091, FS) ID # _____			
2.	Service vehicle or trailer properly identified? (5E-14.103, FAC)			
		TRUCK		
	TRAILER			
3.	Service vehicle equipped with lockable Pesticide storage compartment? Contamination Free? (5E-14.106(3), FAC)			
4.	Pesticide storage compartment secured?: (if unattended vehicle) (5E-14.106(3), F.A.C.)			
5.	Pesticide containers properly identified? (5E-14.106(4), F.A.C.)			
6.	Spray tank air gap or anti-siphoning device present? (5E-14.106(5), F.A.C.)			
7.	All pesticides stored in storage compartment? (Conc. Only) (5E-14.106(3), F.A.C.)			
8.	Pesticides present out of category of licensee? Explain use, if marked yes.			
9.	Pesticide Product Review conducted? If yes, attach PPR form.			
10.	Are appropriate spill materials available?			
11.	Signage available for applications made to exterior foliage? (482.2265(2), F.S., 5E-14.147, F.A.C.)			

Violations Observed: _____

Documentation Obtained: _____

Comments: _____

(Signature of Company Representative)

(Issuing Field Inspector)

(Print Name)