



CHARLES H. BRONSON  
COMMISSIONER

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

**LICENSEE INSPECTION  
FUMIGATION CATEGORY**

Section 482, F.S.

1. FIRM INSPECTED

DATE: \_\_\_\_\_

(NAME)

(BUSINESS LICENSE NO.)

	YES	NO	N/A
1. Are Fumigant RUP records being kept? (5E-14.142(1), F.A.C.)			
2. Are there at least (2) serviceable SCBA available for use? (5E-14.108(6), F.A.C.)			
3. Does the firm maintain at least (2) label approved clearance devices? (5E-14.108(7), F.A.C.) Last Calibration Date _____ Type Device _____			
4. Fumigant storage and security in compliance with fumigant label?			
5. Warning signs appropriate and in compliance? (5E-14.112(3) & (4), F.A.C.)			
6. Sample clearance notice observed and in compliance? (5E-14.113(2), F.A.C.)			
7. Fumigant Fact Sheet available and being used?			
8. Secondary locking devices available and being used? (5E-14.112(7)(c), F.A.C.)			
9. Chloropicrin available and being used per fumigant label? (5E-14.111(6), F.A.C.)			
10. Proper fumigation notice being used? (5E-14.110, F.A.C.)			

Violations Observed: \_\_\_\_\_

Documentation Obtained: \_\_\_\_\_

Comments: \_\_\_\_\_

\_\_\_\_\_  
(Signature of persons interviewed)

\_\_\_\_\_  
(Issuing Field Inspector)