Today's Date: 8/6/01 | County: All

Summary of Field Observations
Branch 1 Fumigation, Methyl Bromide/Vikane

From: 3/26/01 To: 5/24/01

#	Requirement	Total Compliance	Number Yes	Number No	Per Cent Yes	Per Cent No	Not Req'd	Not Obs'd
1	Annual Notification Submitted	28	28	0	100%	0%	0	0
2	County Notified 24 Hrs	28	28	0	100%	0%	0	0
3	Written Notice to occupant	28	28	0	100%	0%	0	0
4	Pesticide Disc. Signed/Avail.	28	28	0	100%	0%	0	0
5	Registered Label at Use Site	28	28	0	100%	0%	0	0
6	Labeling Site/Rate/Conc/Other	28	28	0	100%	0%	0	0
7	Labeling-Other, Bagging, Pets	27	27	0	100%	0%	0	1
8	Labeling-Personal Prot. Equip.	28	27	1	96%	4%	0	0
9	Suitable Methods/Manner/Climate	28	24	4	86%	14%	0	0
10	Accurate Measurement	26	26	0	100%	0%	1	1
11	Protect Persons/Animals/Prop.	28	27	1	96%	4%	0	0
12	Employee(s) Trained	28	27	1	96%	4%	0	0
13	Emergency Medical Posting	28	27	1	96%	4%	0	0
14	Decon: Danger, Warning	27	24	3	89%	11%	0	0
15	Employee Wear Provided PPE	27	27	0	100%	0%	0	1
16	Eyewear Provided and Worn	26	26	0	100%	0%	1	1
17	Accident Response Plan at Site	28	28	0	100%	0%	0	0
18	Two Trained Emp.at Fum/Aer.	27	26	1	96%	4%	0	1
19	Direct Sup. Fum.	27	27	0	100%	0%	0	1
20	Structure Vac.	27	27	0	100%	0%	0	1
21	Warning Signs on all Sides	28	28	0	100%	0%	0	0
22	Effective Secondary Locks	27	26	1	96%	4%	0	1
23	Required Info. on all Warn.	27	27	0	100%	0%	0	1
24	Two SCBA Available	28	27	1	96%	4%	0	0
25	Proper Mgt. off Treated Area	28	28	0	100%	0%	0	0
26	Safety Kit/Test Equip. Available	28	28	0	100%	0%	0	0
27	Warning Agent Required	28	28	0	100%	0%	0	0

Today's Date: 8/6/01	County: All

Summary of Field Observations
Branch I Aeration, Methyl Bromide/Vikane

From: 3/26/01 To: 5/24/01

#	Requirement	Total Compliance	Number Yes	Number No	Per Cent Yes	Per Cent No	Not Req'd	Not Obs'd
1	Annual Notification Submitted	17	17	0	100%	0%	0	0
2	County Notified 24 Hours Prior	17	17	0	100%	0%	0	0
3	Labeling - Aeration/Reentry	17	16	1	94%	6%	0	0
4	Suitable Methods/Manner/Tarp	17	15	2	88%	12%	0	0
5	Label on Site	17	17	0	100%	0%	0	0
6	Projtect Persons/Animals/Prop	17	17	0	100%	0%	0	0
7	Employee(s) Trained	17	17	0	100%	0%	0	0
8	Emergency Medical Posting	17	17	0	100%	0%	0	0
9	Decon: Danger, Warning	17	17	0	100%	0%	0	0
10	Tarp Removal and Aer. Plan	14	13	1	93%	7%	0	3
11	Accident Response Plan at Site	17	17	0	100%	0%	0	0
12	Structure Vac/Cert for Reentry	16	16	0	100%	0%	1	0
13	Warning Signs on all Sides	16	16	0	100%	0%	0	1
14	Effective Secondary Locks	16	16	0	100%	0%	0	1
15	Required Info.on all Warn.	16	16	0	100%	0%	0	1
16	Signs in Attic or Underarea/Certif.	9	9	0	100%	0%	7	1
17	Two SCBA Available	17	17	0	100%	0%	0	0
18	Proper Entry/Fum. Enclosed Space	17	15	2	88%	12%	0	0
19	Proper Mgt. of Treated Area	17	16	1	94%	6%	0	0
20	Safety Kit/Test Equip. Available	17	17	0	100%	0%	0	0
21	Two Trained Emp. At Aer.	17	17	0	100%	0%	0	0
22	Direct Sup.Fum.and Aeration	17	17	0	100%	0%	0	0

Today's Date: 8/6/01 | County: All

Summary of Field Observations
Unattended Structural Aeration

From: 3/29/01 To: 5/25/01

#	Requirement	Total Compliance	Number Yes	Number No	Per Cent Yes	Per Cent No	Not Req'd	Not Obs'd
1	Annual Notification Submitted	21	21	0	100%	0%	0	0
2	County Notified 24 Hours Prior	21	21	0	100%	0%	0	0
3	Labeling - Aeration/Reentry	21	19	2	90%	10%	0	0
4	Warning Signs on all Sides	21	21	0	100%	0%	0	0
5	Effective Secondary Locks	21	20	1	95%	5%	0	0
6	Required Information on Warning Sig	21	20	1	95%	5%	0	0
7	Proper Management/Treated Area	21	19	2	90%	10%	0	0

Today's Date: 8/6/01	County: All

Summary of Field Observations
Structural Equipment

From: 3/26/01 To: 5/24/01

#	Requirement	Total Compliance	Number Yes	Number No	Per Cent Yes	Per Cent No	Not Req'd	Not Obs'd
1	Backflow Airgap Used	6	6	0	100%	0%	38	0
2	Equipment Properly Identified	44	43	1	98%	2%	0	0
3	Pesticides Locked/Attended	44	42	2	95%	5%	0	0
4	Service Containers Labeled	10	3	7	30%	70%	34	0
5	Pesticides Properly Transported	44	44	0	100%	0%	0	0
6	Equipment Safe & in Good Repair	44	42	2	95%	5%	0	0
7	Pesticide Handling/Use/Storage	41	41	0	100%	0%	3	0

Today's Date: 8/6/01 | County: All

Summary of Field Observations
Structural Branch 2 & 3

From: 3/26/01 To: 5/8/01

#	Requirement	Total Compliance	Number Yes	Number No	Per Cent Yes	Per Cent No	Not Req'd	Not Obs'd
1	Annual Notification Submitted	5	5	0	100%	0%	0	0
2	Written Notice to Occupant	6	6	0	100%	0%	0	0
3	Registered Label Available at Use Site	6	5	1	83%	17%	0	0
4	Labeling: Site/Rate/Conc/Other	6	6	0	100%	0%	0	0
5	Labeling: Personal Protective Equip	4	4	0	100%	0%	1	0
6	Suitable Meth/Equip./Manner/Climate	5	5	0	100%	0%	0	1
7	Accurate Measurement	6	6	0	100%	0%	0	0
8	Protection Persons/Animals/Property	6	5	1	83%	17%	0	0
9	Containers properly rinsed	2	2	0	100%	0%	3	1
10	Employee(s) Trained	6	6	0	100%	0%	0	0
11	Emergency Medical Care Posting	6	4	2	67%	33%	0	0
12	Decontamination facilities:Danger/Wa	4	4	0	100%	0%	0	0
13	Coveralls: Danger / Warning	1	1	0	100%	0%	2	0
14	Employee Wearing PPE	6	5	1	83%	17%	0	0
15	Prot. Eyewear Provided and Worn	6	4	2	67%	33%	0	0
16	C/R. Gloves Provided and Worn	6	6	0	100%	0%	0	0
17	Other PPE:Boots, Headgear, Apron, R	0	0	0	0%	0%	4	0

Today's Date: 8/6/01 | County: All

Summary of Field Observations
Non-Production, AG\Landscaping

From: 3/26/01 To: 5/10/01

#	Requirement	Total Compliance	Number Yes	Number No	Per Cent Yes	Per Cent No	Not Req'd	Not Obs'd
1	Registered Label Available at Use Site	5	2	3	40%	60%	0	0
2	Labeling: Site/Rate/Conc/Other	2	2	0	100%	0%	0	3
3	Labeling: Personal Protective Equip	4	3	1	75%	25%	0	1
4	Suitable Meth/Equip./Manner/Climate	5	5	0	100%	0%	0	0
5	Accurate Measurement	1	1	0	100%	0%	1	3
6	Protection Persons/Animals/Property	5	4	1	80%	20%	0	0
7	Containers properly rinsed	0	0	0	0%	0%	2	3
8	Employee(s) Trained	4	4	0	100%	0%	1	0
9	Emergency Medical Care Posting	4	1	3	25%	75%	1	0
10	Decontamination: Danger Warning	2	1	1	50%	50%	3	0
11	Coveralls: Danger/Warning	1	1	0	100%	0%	4	0
12	Employee Wearing Provided PPE	4	2	2	50%	50%	1	0
13	Protective Eyewear Provided and Wor	4	3	1	75%	25%	1	0
14	C/R Gloves Provided and Worn	4	2	2	50%	50%	1	0
15	PPE: Boots, Headqear, Apron, Resp.	0	0	0	0%	0%	5	0