



# ACTISOL TREATMENT PREPARATION FORM

The following steps are required and will assist in the elimination of your roach population.

Please make required preparations the day prior to your scheduled service day.

**All steps must be completed for treatment to be performed.**

1. \_\_\_\_\_ **Empty ALL cupboards, drawers, pantry, and clear countertops:** This includes all bathrooms as well as the kitchen. Make sure all food is sealed tightly in bags or containers. You can place all items in the living room or on a dining table.
2. \_\_\_\_\_ **Clean your kitchen thoroughly:** Using a grease-cutting spray cleaner, clean all surfaces including countertops, appliances and floors. Pull the stove and fridge away from the wall and clean beneath. Scrub the stove and microwave thoroughly (inside and out) with a grease-cutting cleaner. Be sure to include the shelves inside the oven and storage drawer beneath. Scrub any/all grease or oil that can be identified as a residue from surfaces paying particular attention to baseboards/edges where the floor meets wall/ cabinets.
3. \_\_\_\_\_ **Inside cabinets:** Remove shelf liners if present. Use 2 tablespoons of grease-cutting detergent to one-half gallon of water and use a scouring sponge to scrub interior surfaces.
4. \_\_\_\_\_ **Remove all clutter:** Throw away cardboard boxes, plastic/paper bags and other clutter that can shelter roaches. Throw away expired or deteriorated food from your pantry and in your refrigerator. **Throw out any food containers that cannot be sealed tightly.**
5. \_\_\_\_\_ **Resident and pets must be out of the unit for a minimum of 2 hours after treatment. Fish tanks must be turned off and covered.**

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PLEASE LEAVE THIS SIGNED PART OF FORM IN ENVIROSMART MULTIFAMILY PEST SOLUTIONS LOG BOOK

I have read, understand and will follow the required preparations for roach treatment.

\_\_\_\_\_  
Signed by Resident

\_\_\_\_\_  
Unit# \_\_\_\_\_ Date \_\_\_\_\_