

COMPANY NAME :- (Pest Control Company Name)

ADDRESS :-

COSHH ASSESSMENT

CUSTOMER'S NAME :- (Pest Control Company's customer's name)

ADDRESS :-

ORDER REF :-

1. I have identified a need to use a pesticide at the premise above to control an insect/rodent pest as indicated below;

Pest	Tick	Area to be treated	Tick
Flying insects		Kitchen	
Crawling insects		Ground Floor	
Insects of stored products		First Floor	
Fleas		Roof void	
Ants		Air vent	
Wasps		Flat Roof	
Cockroaches		Perimeter of building	
Moths		Garden	
Booklice		Paddock	
Others		Out Buildings	
Rats		Office	
Mice		Factory	
Moles		Shop	
Rabbits		Field	
Woodworm		Other	

2. It is intended to use the following substance to control the pest.

e.g.

Product name	a.i.	Hazard Classification	Dose/application method	Health Hazard
ABC Powder Concentrate Insecticide	bendiocarb	HARMFUL	1 sachet to 5 L for 100m ² / spray	Harmful by inhalation and if swallowed.
Rat & Mouse Bait	brodifacoum	NOT CLASSIFIED	200g / at bait stations	Only hazardous if large quantities ingested.

COSHH ASSESSMENT

Cont'd:-

2. The Company has used the Approved Code of Practice entitled "The safe use of pesticides for non-agricultural purposes. Control of Substances Hazardous to Health Regulations 2002" to establish good practice in meeting standards for persons using non-agricultural pesticides.

3. I have used the Product Safety Data Sheet to consider the product hazard and any occupational exposure standards (OES) of listed ingredients in relation to the proposed use.

NOTES:-

4. I have checked that the product's approval/field of use is relevant to the pest problem to be controlled.

NOTES:-

5. This COSHH assessment concludes that risks to the health of operators and persons at the treatment site can be adequately controlled by using the product indicated, adhering to label instructions and using PPE when necessary. A trained operator will carry out the treatment using good working practices.

The following specific precautions, will be implemented:-

PPE	-	describe
Restrict access	-	describe eg. deny access to crawling infants onto treated surfaces.
Ventilation	-	leave area clear for ---- stipulate time and other restrictions.
Others	-	Ask if any asthmatics or pets are likely to be present. Take precautions against contact. Consider pilot lights, ventilation systems, connecting corridors/ducts to other occupied areas.

6. Sketch or list specific areas to be treated at the customers' premise.

7. A sheet showing precautions to be observed and a contact telephone number has been left/will be left with the client.

risk assessment by:-
date of this risk assessment:-
treatment to be carried out by:-
date of treatment:-