



## PREPARTION SHEET FOR

### CARPET BEETLE

For treatment to be successful the following preparation must be completed prior to service.

It is required for you to **remove all pets** and cover fish tanks **YOU MUST stay out of the unit during and after treatment for 4 hours.**

Persons with underlying health conditions should consult their family physician where they have concerns regarding re-entry time. Upon re-entry, please open windows for 20 min to properly ventilate the treated rooms.

What causes you to get carpet beetles?

**Carpet beetles** are attracted to food and perspiration stains on clothing, especially clothes made from wool blends, cotton, linen and synthetic materials. Do not let **your** dirty clothes sit out longer than a week if they **have** stains on them.

How do I get rid of carpet beetles?

**You will need to remove the eggs, larvae, and adult beetles with intensive effort.**

1. Vacuuming. ...
2. Steam cleaning. ...
3. Laundering pillows and clothing. ...
4. Wiping or spraying surfaces with vinegar. ...
- 5. Our technicians will need access to all baseboards and electrical outlets throughout unit as much as possible.**
- 6. Vacuum along all baseboards prior to treatment... after treatment do not wash/vacuum baseboards, you can let treatment sit for few weeks or longer as desired.**

Acknowledgement; I agree that under no circumstances shall PEST CONTROL PLUS be held liable for direct or indirect injuries or damage to the building premise or contents stemming from the treatment. I, the client, waive any claims of liability against PEST CONTROL PLUS directly or indirectly caused by PEST CONTROL PLUS products, equipment or staff.



What spray kills carpet beetles?

A residual, chemical insecticide can be an effective way to control Carpet beetles, as the active ingredient controls for several weeks.

DETACH AND RETURN TO MANAGEMENT OFFICE

I am aware of the preparations and agree to have Pest Control Plus.....

Perform the service in Suite # \_\_\_\_\_ located at \_\_\_\_\_

\_\_\_\_\_

Date

Resident Signature

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