

TEMPLATE INTEGRATED PEST MANAGEMENT PLAN (IPM PLAN)

Location address: _____ Map _____ Lot _____

Facility name: _____

Goal: The goal of this IPM plan is to prevent pest infestation of the facility and its surrounding environment.

Underlying principles:

1. This IPM program recognizes that pest management is an ongoing daily process, not a one-time or periodic event.
2. This IPM program is designed to minimize reliance on pesticides.
3. This IPM program addresses the underlying causes of pest infestations – access to food, water and shelter – to prevent infestation before pesticides are even considered.
4. This IPM program requires a partnership between facility management and the contracted pest control provider.
5. This IPM program recognizes that responsibility for pest prevention and management remains with the facility manager, even when a contracted pest control provider is part of the IPM program.

Procedures:

1. Names, titles, and contact info for facility managers: _____

2. Names and certifications of licensed pest control operators:

3. Date of initial survey by licensed pest control operator: _____
 - a. Attach survey or answer the following:
 - i. Active pest presence? Describe:

 - ii. Burrows present? Describe:

 - iii. Sanitation deficiencies present? Describe:

4. Types of pest control measures to be implemented on site:
 - a. Locations of traps and schedule for monitoring: _____

b. Locations of bait stations and schedule for monitoring: _____

c. Types and amounts of pesticides used: _____

d. Schedule for cleanup of bait stations and pest carcasses, and name of responsible person:

e. Name, title, and contact info for person responsible for maintaining and reviewing pest monitoring log and pest control log and implementing recommendations: _____

5. Dates of staff training on identifying and reporting pest problems:

a. Training conducted by: _____

6. Procedures for identifying and managing sources of food, water, and harborage on the site: Attach management plan that addresses sanitation issues and vegetation management. Responsible person:

7. Procedures for identifying and managing points of entry into the facility: Attach management plan. Responsible person:

8. Procedures for responding to pest complaints associated with the site, including name and contact information for individual to respond to neighborhood complaints. Attach procedures. Responsible person and contact information:

Date of Plan Implementation: _____

Required attachments:

- Agreement with pest control operator for surveillance and treatment. Agreement should specify timeframes for routine service and enhanced service schedule if infestation is identified.
 - Sanitation procedures
 - Vegetation management procedures
 - Point-of-entry management plan
 - Complaint response plan
 - Pest monitoring log
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Office use:

Date plan initially submitted: _____ Plan complete? Y N

Date plan resubmitted: _____ Plan complete? Y N Date plan resubmitted: _____ Plan complete?

Y N Date plan resubmitted: _____ Plan complete? Y N

Date plan approved: _____ by _____
