



Integrated Pest Management Inspection Log

Kitchens / Food Prep Areas



Facility	IPM Site Coordinator	Inspected By	Date

1. Food Handling and Storage Areas

	Yes	No	N/A
1a. Ensured all food is stored in sealed containers no traces of food on outside surfaces...	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1b. Verified there is no long term storage of items in cardboard boxes.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1c. Ensured disposed of food scraps properly and remove crumbs.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1d. Verified food storage areas are clean and clutter free.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1e. Verified all storage is kept off the floor and on open type shelving.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1f. Ensured all floors are properly swept and wet mopped daily and after spills.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

2. Cooking / Prep Area

	Yes	No	N/A
2a. Checked for odors near cooking, preparation, and eating areas.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2b. Ensured there are no combustion gas or natural gas odors, leaks, back-drafting, or headaches when gas appliances are used.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2c. Ensured that exhaust fans are used whenever cooking, washing dishes, and cleaning..	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2d. Determined that gas appliances function properly.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2e. Verified that gas appliances are vented outdoors.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2f. Ensured all counters are cleaned with soap & water then disinfected (2 steps).....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2g. Verified under sinks and equipment are kept clean and clutter free.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

3. General

	Yes	No	N/A
3a. Verified area is free of unauthorized pesticides.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3b. Verified pest monitors are present, numbered and dated.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3c. Checked storage, cooking, preparation, laundry, dish rooms and areas for signs of pests (for example, feces or remains).....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3d. Ensured trash is emptied daily (never left over night).....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3e. Verified that dumpsters are properly located (away from air intake vents, operable windows, and food service doors).....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3f. Verified door sweeps are installed and in good repair.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3g. Verified all windows have screens and close tight with no gaps.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3h. Verified the kitchen is free of plumbing and ceiling leaks.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3i. Verified all floor drains and sinks are clean and P-traps are full.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3j. Determined there are no signs of microbiological growth in the kitchen, including the upper walls and ceiling (for example, mold, slime, and algae).....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3k. Verified area is free of open holes or other access to the outside.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3l. Verified any cracks in walls or floors are sealed properly.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3m. Verified all vents and exhaust hoods are free of grease and/or dust.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3n. Verified wet mops/dust mops are clean and hung up when not in use (off the floor)....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3o. Ensured that kitchen is cleaned after every use.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3p. Ensured that food preparation, cooking, and storage practices are sanitary.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



Integrated Pest Management Inspection Form

Classrooms / Faculty Room / Offices



Facility

IPM Site Coordinator

Inspected By

Date

4. Classrooms

	Yes	No	N/A
4a. Verified room is free of unauthorized pesticides.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4b. Verified any pest monitors present are numbered and dated.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4c. Verified room is free of excessive clutter.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4d. Verified storage is free of items stored for long term in cardboard boxes.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4e. Ensured recycle bins are clean and emptied regularly.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4f. Verified all food items are stored in sealed plastic containers.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4g. Verified student desks and cubbies are clean and free of food.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4h. Verified any animal or bird food is stored in sealed plastic containers.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4i. Verified animal or bird cages are clean including surrounding areas.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4j. Verified indoor plants are healthy and free of pests.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4k. Verified outside windows/doors have screens and close tight with no gaps.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4l. Ensured trashcans are clean and emptied daily (never left over night).....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4m. Verified area is free of open holes or other access to the outside.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4n. Verified any cracks in walls or floors are sealed properly.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4o. Verified area is free of plumbing and ceiling leaks.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4p. Verified carpet is in good repair, vacuumed and cleaned regularly.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4q. Verified area is free of cloth couches or chairs.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

5. Faculty Room / Offices

	Yes	No	N/A
5a. Verified room is free of unauthorized pesticides.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5b. Verified any pest monitors present are numbered and dated.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5c. Verified room is free of excessive clutter.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5d. Verified storage is free of items stored for long term in cardboard boxes.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5e. Verified all food items are stored in sealed plastic containers.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5f. Verified indoor plants are healthy and free of pests.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5g. Verified outside windows/doors have screens and close tight with no gaps.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5h. Ensured trashcans are clean and emptied daily (never left over night).....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5i. Verified area is free of open holes or other access to the outside.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5j. Verified any cracks in walls or floors are sealed properly.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5k. Verified area is free of plumbing and ceiling leaks.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5l. Verified refrigerator gaskets are clean and pest free.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5m. Ensured that exhaust fans are used whenever cooking, washing dishes, and cleaning..	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5n. Verified under sinks and equipment are kept clean and clutter free.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5o. Verified area is free of plumbing and ceiling leaks.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5p. Verified vending machines and area are clean.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5q. Ensured that kitchen is cleaned after every use.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5r. Verified carpet is in good repair, vacuumed and cleaned regularly.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5s. Verified area is free of cloth couches or chairs.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



Integrated Pest Management Inspection Form

Grounds / Entranceways / HVAC Areas



Facility	IPM Site Coordinator	Inspected By	Date

6. Grounds

	Yes	No	N/A
6a. Verified any pest monitors present are numbered and dated.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6b. Verified grounds are free of excessive garbage, weeds, and trash.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6c. Verified lawns are mowed and trimmed regularly.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6d. Verified grounds have adequate drainage and free of standing water.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6e. Verified bushes, shrubs and trees are trimmed and away from building.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6f. Verified eaves, roofs are free of bird nests, bee hives, wasps nests etc.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6g. Verified sheds are sealed to the outside to keep pests out.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6h. Verified that dumpsters are properly located (away from air intake vents, operable windows, and food service doors).....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6i. Verified that dumpsters and surrounding area is properly cleaned and maintained.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6j. Verified pavement and concrete are free from cracks (properly sealed).....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6k. Verified trashcans have lids and are cleaned regularly.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

7. Entranceways and Vestibules

	Yes	No	N/A
7a. Verified any pest monitors present are numbered and dated.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7b. Verified doors shut tight, fully close on their own and kept closed when not in use.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7c. Verified door sweeps and other weather stripping completely cover the door.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7d. Verified cracks or openings around doors or walls are sealed.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7e. Verified area is free of open holes or other access to the outside.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7f. Verified trashcans are cleaned regularly.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7g. Verified area is free of ceiling leaks.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7h. Ensured area is properly swept daily and spills are quickly cleaned.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7i. Verified carpet is in good repair, vacuumed and cleaned regularly.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

8. Boiler Rooms / Fan Rooms / Mechanical Rooms

	Yes	No	N/A
8a. Verified area is free of unauthorized pesticides.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8b. Verified any pest monitors present are numbered and dated.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8c. Verified doors shut tight, fully close on their own and kept closed when not in use.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8d. Verified door sweeps and other weather stripping completely cover the door.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8e. Verified cracks or openings around doors or walls are sealed.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8f. Verified area is free of open holes or other access to the outside.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8g. Verified area is free of standing water.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8h. Verified area is free of plumbing and ceiling leaks.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8i. Verified all floor drains and sinks are clean and P-traps are full.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8j. Verified outside air intakes are properly screened and free of trash.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8k. Verified area is free of excessive clutter.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8l. Verified area is regularly cleaned including equipment, floors, walls etc.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



Integrated Pest Management Inspection Form

Restrooms / Locker Rooms / Custodial Areas



Facility

IPM Site Coordinator

Inspected By

Date

9. Restrooms / Locker Rooms

	Yes	No	N/A
9a. Verified area is free of unauthorized pesticides.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9b. Verified any pest monitors present are numbered and dated.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9c. Verified doors shut tight, fully close on their own.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9d. Verified door sweeps and other weather stripping completely cover the door.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9e. Verified cracks or openings around doors or walls are sealed.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9f. Verified area is free of open holes or other access to the outside.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9g. Verified area is free of plumbing and ceiling leaks (including sinks, toilets, showers)....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9h. Verified area is free of standing water.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9i. Verified all floor drains and sinks are clean and P-traps are full.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9j. Determined there are no signs of microbiological growth on walls, ceiling, floors (for example, mold, slime, and algae).....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9k. Verified area is free of excessive clutter.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9l. Ensured trash is emptied daily (never left over night).....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9m. Verified area is regularly cleaned including showers, floors, walls, fixtures etc.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

10. Custodial Closets / Supply Rooms / Receiving Area

	Yes	No	N/A
10a. Verified area is free of unauthorized pesticides.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10b. Verified any pest monitors present are numbered and dated.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10c. Verified area is free of any food or beverages	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10d. Verified doors shut tight, fully close on their own and kept closed when not in use...	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10e. Verified door sweeps and other weather stripping completely cover the door.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10f. Verified cracks or openings around doors or walls are sealed.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10g. Verified area is free of open holes or other access to the outside.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10h. Verified area is free of plumbing and ceiling leaks.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10i. Ensured that exhaust fans are operating properly.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10j. Verified all floor drains and sinks are clean and P-traps are full.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10k. Ensured trash is emptied daily (never left over night).....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10l. Verified area is free of excessive clutter.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10m. Verified all storage is kept off the floor and on open type shelving.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10n. Verified wet mops/dust mops are clean and hung up when not in use (off the floor).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10o. Verified that custodial cart/barrel trash is emptied daily, kept clean and sanitary.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10p. Determined there are no signs of microbiological growth on walls, ceiling, floors (for example, mold, slime, and algae).....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10q. Verified area is free of cloth couches or chairs.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10r. Verified area is regularly cleaned including equipment, floors, walls, shelving etc.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>