



OCCUPANTS FUMIGATION NOTICE AND PESTICIDE DISCLOSURE

JOB ADDRESS _____ CITY _____
 Single Family Dwelling Multi Family Dwelling Other _____
Owner/Agent _____
Telephone No. () _____ Emergency No. () _____
Occupant _____
Telephone No. () _____ Emergency No. () _____
Prime Contractor _____ Emergency No. () _____
Fumigation Contractor CARNIVAL FUMIGATION INC. Emergency No. (714) 680-4491
Target Pest(s): Drywood Termites Beetles Other(s) _____
Fumigants proposed to be used: Sulfuryl Fluoride (Vikane) PRODUCT NAME _____

Are you aware of any conduits, pipes, common drains, air ducts, central vacuum systems or any other construction elements that would allow the passage of a fumigant from the structure to be fumigated to any other adjacent or adjoining structure? YES NO

CHLOROPICRIN WILL BE USED AS WARNING AGENT WITH EITHER FUMIGANT

Dates of fumigation: _____ - _____ Date changes / Alternative date: _____

Initials: _____

IMPORTANT - READ CAREFULLY

THIS BUILDING WILL BE FUMIGATED WITH LETHAL GASES ON THE DATE(S) INDICATED ABOVE. ALL PERSONS AND ANIMALS MUST VACATE THE PREMISES ON OR BEFORE ARRIVAL OF THE FUMIGATION CREW.

UNDER NO CIRCUMSTANCES CAN ANYONE ENTER THE BUILDING UNTIL THE FUMIGATION COMPANY'S NOTICE IS POSTED GIVING THE TIME AND DATE FOR SAFE RE-ENTRY.

"State law requires that you be given the following information: CAUTION - PESTICIDES ARE TOXIC CHEMICALS. Structural pest control companies are registered and regulated by the Structural Pest Control Board, and apply to pesticides which are registered and approved for use by the California Department of Pesticide Regulation and the United States Environmental Protection Agency. Registration is granted when the State finds that based on existing scientific evidence there are no appreciable risks if proper use conditions are followed or that the risks are outweighed by the benefits. The degree of risk depends upon the degree of exposure, so exposure should be minimized."

If within 24 hours you experience symptoms of dizziness, headache, nausea, reduced awareness, slowed movement, garbled speech or difficulty breathing, leave the structure immediately and seek medical attention by contacting your physician or Poison Control Center and notify your pest control company. The warning agent, chloropicrin, can cause symptoms to tearing, respiratory distress and vomiting. Entry into the space during fumigation can be fatal.

For further information, contact any of the following: Your pest control company; for Health Questions - The County Health Department; for Application information - The County Agricultural Commissioner and for Regulatory information - The Structural Pest Control Board, (800) 737-8188, 2005 Evergreen Street, Ste. 1500, Sacramento, CA 95815-3831

HEALTH QUESTIONS:

COUNTY	COUNTY HEALTH DEPARTMENT	COUNTY AGRICULTURAL COMMISSIONER	POISON CONTROL CENTER	STRUCTURAL PEST CONTROL BOARD
Los Angeles	800 427-8700	626 575-5466	(800) 876-4766 All Counties	(800) 737-8188 All Counties
Riverside	951 358-5000	951 955-3000		
San Bernardino	800 782-4264	909 387-2105		
Orange	714 834-7700	714 955-0100		
San Diego	619 338-2222	858 694-2739		
Ventura	805 654-2813	805 933-3165		
Alamameda	510 567-8000	510 267-8000		
San Mateo	650 573-2346	650 363-4305		
Santa Clara	408 918-3400	408 423-0700		
Contra Costa	510 646-2521	925 646-5250		
San Francisco	415 554-2500	415 252-3862		

I hereby acknowledge receipt of a copy of this document as well as a list that includes the instructions for the necessary preparations for fumigation, procedures for leaving the structure, and the following documents.

KEY INSTRUCTIONS:

GAS TURN OFF: DATE: _____

We suggest that you notify nearby neighbors of the date of fumigation and to keep pets away during the fumigation. Close off any open access to the subarea to prevent pets from entering.

[] Owner/Agent (signature) _____ Date _____

[] Owner/Agent (signature) _____ Date _____

TERM, CONDITIONS AND LIABILITIES

FUMIGATION CHECKLIST

After reading, please check boxes & sign at the bottom. Please fax or email along with Occupants Fumigation Notice to (714)680-4496 fax or carnivalfume@gmail.com, we must receive signed forms 48hr prior fume date!!!

1. **Carnival Fumigation will request the gas shut-off order with The Gas Company.** A minimum 2 days (48 hours) is required. The Gas Company will shut the gas off at the meter between 7am-11:30am on the day of the fumigation (NO WEEKEND SHUT-OFF IS AVAILABLE). No one needs to be at the property for gas shut-off, but they do need to have access to the meter. (Gates MUST BE unlocked, no pets, etc).
2. **Gas turn-on:** Home owners and/or agent MUST call The Gas Company to schedule a gas turn-on order. A **minimum (24 hours)** is required. You or an authorized agent must be **PRESENT** at the time of the turn-on, and must provide The Gas Company with proof of Certification for Re-Entry (We will provide you with the Certification when the job is completed) to ensure it is safe to re-enter the property. All appliances will be inspected for safety as part of the gas turn-on service. **Southern California Gas Company (800) 427-2200 Long Beach Energy Utility (562) 570-5700.**
3. The fumigated structure must not be re-entered until it has been cleared for re-entry by the licensed fumigator. RE-ENTRY NOTICE will be posted on the front door.
4. **All items for human consumption (such as foods, beverages, drugs, and medicines), which are not intact in the original manufacturer's airtight containers (such as sealed glass, plastic, or metal), must be removed from the structure prior to fumigation or double bagged in the provide Nylofume bags ONLY!!! THIS INCLUDES CONTENTS OF REFRIGERATORS & FREEZERS. Remove all food items to be 'thrown away' before fumigation. VIKANE BAGGING INSTRUCTIONS CAN BE FOUND AT: WWW.TERMITEFUMIGATION.COM UNBAGGED/SEALED FOOD WILL BE BAGGED OR SEALED AT AN ADDITIONAL CHARGE OF \$25 PER BAG.**
5. Remove all waterproofed mattresses and pillows with waterproof covers, such as "can't wet" mattresses for infants or sickrooms, or remove the covers. (Excluding waterbeds).
6. All cabinets, drawers, closets, storage chests, and interior doors must be opened. Raise blinds and open drapes. Remove garment bags from hanging and folded clothes, linens etc.
7. **ALL VEHICLES MUST BE REMOVE FROM THE GARAGE/CARPORT.**
8. Shut-off automatic switch/controls for appliances & lighting systems that will be included in the space to be fumigated, including exterior lights (sensor lights, parking lights, etc).
9. Cut back shrubbery, trees, branches, ivy 12 to 18 inches from the building perimeter to prevent damage. Allow enough space for tent to fall freely to the ground. Tree limbs growing over the roof must be trimmed back. Soak thoroughly the ground around shrubs and plants located around the perimeter of the structure the night before the fumigation. Remove all plants from under patio covers, attached decks and balconies.
10. Trim trees, foliage, remove rock and gravel within 24 inches of the side of the house and 3 feet above the house. Remove potted and/or hanging plants, lawn furniture, Malibu lighting, etc. from perimeter of the structures.
11. All people must leave and all living things, such as pets (including fish from aquariums and growing plants), must be removed from your building before the fumigation begins.
12. All outdoor pets **must be removed from property.**
13. When masking tape must be used for sealing purposes, the fumigation company cannot be responsible for paint or plaster lifting off when the tape is removed.
14. All obstructive articles such as antenna guide wires, satellite dishes or weather vanes must be removed. The company cannot be responsible for changes in TV reception after the fumigation is completed. The company will exercise extra care in its fumigation procedures, but will not be responsible for obstructive articles on the roof. Retract all awnings.
15. Notify the company prior to the fumigation if any conduits, tunnels, pathways, etc. are connecting the building to be fumigated to any other structure.
16. During the fumigation and aeration procedure, the company will not be held responsible for vandalism, theft, or breaking and entering. Please make special security arrangements prior fumigation, if needed.
17. Please make prior arrangements with your inspector to leave keys at a place accessible to the fumigations, (management office, owner to meet). The law requires that all buildings be locked during fumigation. It is most important that you make key arrangements with our office or the Operator conducting fumigation.
18. **IMPORTANT: Leave signed Occupants Fumigation Notice (sign both sides/both pages), and all keys in an accessible place as mentioned above, or job WILL HAVE TO BE RE-SCHEDULE!!! WE MUST HAVE ACCESS TO ALL AREAS WITHIN THE STRUCTURE (DETACHED GARAGE, STORAGE, CLOSETS, ETC). IF WALK-IN OR LARGE SAFES EXISTS, YOU MUST BE PRESENT TO OPEN THEM FOR OUR INSPECTION BEFORE RELOCKING THE SAFE. THIS IS REQUIRED BY LAW!!!**
19. Electricity must be available, as it will be required to run fans during fumigation period, or job **WILL HAVE TO BE RE-SCHEDULE.**
20. **Tile Roofs:** Warning: Due to the process of fumigation, there may be minor to extensive damage done to tile roofs. The undersigned agrees that Carnival Fumigation and/or _____ does not have any responsibility and is not liable for damage done to tiles. It has been explained to the undersigned that every effort will be taken to reduce or avoid damages. It was also explained to the undersigned that the fumigation workers will be walking on the roof and that extra care will be exercised. Due to the fragile nature in which mobile homes are constructed, we can assume no responsibility and is not liable for damage done to tiles of any kind (concrete, aluminum, etc) roof coverings, aerial antennae, satellite dish, gutters, electrical wiring, patio and awning covers, solar panels, weather vane, carports, roof rails or siding, etc.
21. **Plants:** Warning: Due to the process of fumigation, there may be damage to plants in and surround the structure. The undersigned agrees that Carnival Fumigation and/or _____ does not accept responsibility and is not liable for damage done to plants in and around structure. It has been explained to the undersigned that every effort will be taken to reduce or avoid plant damage.
22. **Satellite Dishes:** Warning: Due to the process of fumigation, there is a minimum chance of damage and/or misalignment to satellite dishes. The undersigned agrees that Carnival Fumigation and/or _____ does not accept responsibility and is not liable for damage/misalignments to dishes. Dishes are highly sensitive and our crew prefers not to touch them if possible. It has also been explained that the undersigned may want to contact their satellite company to take care of removal/return and alignment of these dishes. It has been explained to the undersigned that every effort will be taken to reduce or avoid damage.
23. Our crew must fumigate several structures in various locations each day. Therefore anytime of the day for the Fumigation to be schedule will be an **APPROXIMATE** time only.
24. We DO NOT provide on site security during the fumigation process or during the ventilation procedure, and our insurance DOES NOT cover malicious vandalism, or theft (screened windows are left open for ventilation of the structure). Carnival fumigation and/or _____ does not accept responsibility and is not liable for any vandalism, break-ins, robbery during the fumigation process. For insurance purposes, we request you **REMOVE and take VALUABLES**, such as jewelry, furs, money, etc.
25. Weather conditions (rain, high winds, etc) will result in delays or **POSTPONEMENT** of fumigation.
26. If tarping of the building will require entrance into your neighbor's yard by fumigation company, his/her pets must be removed or tied up. It is **YOUR** responsibility to inform your neighbor(s) and secure permission to their property. Your neighbor's plants may be affected if growing on or directly adjacent to your structure.

I have read and understood the above and agree to all the provisions and liabilities contained above.

[] OWNER/AGENT x _____ DATE _____

[] OCCUPANT(S) x _____ DATE _____

Carnival Fumigation Inc. Number Date of Fumigation