Residence Insect Identification Form

Schutter Diagnostic Lab - Insect
119 AgBioScience Facility
P.O. Box 173150
Montana State University
Bozeman, MT 59717

Date (MM/DD/YY)

Client Name

Email

Address

Phone

Structure insect is associated with

Household pests - What part of the building/house was the insect found?

Approximate date problem first appeared (MM/DD/YY)

Comments - Describe problem

Check insect problem:

☐ Biting/Stinging ☐ Nuisance ☐ Infesting plant
☐ Damaging ☐ Infesting food ☐ In Stored Products

Degree of Infestation:

☐ Light ☐ Moderate ☐ Severe

Do you have children or pets in the home?

☐ Yes ☐ No

Are you completely opposed to the use of pesticides in the home or will you use them if necessary?

☐ Yes ☐ No

List any treatments applied for the problem:

Did they work?

☐ Yes ☐ No

What would you like you to use?

Agent

Email

County

Phone

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