



# FLEA PREP SHEET (Siphonaptera)

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Dear Residents,

Here are a few **crucial** steps to help for Flea elimination, your cooperation is greatly appreciated:

- Remove ALL objects from under beds and floors
- Wash in HOT water or destroy all pet bedding. If thrown away, place bedding in a sealable plastic bag and dispose of into an exterior trash bag.
- Vacuum all carpeting and rugs thoroughly for 7 days (if vacuum uses bags, throw bag away in sealable trash bag)
- Vacuum furniture (between and under cushions, under furniture, cracks, crevices)
- Vacuum window sills and appliance tops
- Vacuum pet sleep and resting areas carefully,
- Vacuum wood, tile, and vinyl floors (Do NOT mop, it will not remove the fleas)
- Empty the contents of the vacuum cleaner into a plastic bag (immediately dispose of in outside trash)
- Aquarium must be covered with pump off for fresh water, ask us about salt water aquariums.
- Store and cover all food
- Litter box MUST be removed

**PET SAFETY**-Remove food and water from dishes and wash with HOT soapy water after treatment. All pets need to be removed. Pests MUST be treated (while home is treated), vet will offer products like Advantage or Frontline. Once your pet is treated, CONTINUE to treat even when you don't see any more fleas.

Treatment will include all carpeted areas, rugs, bottom of drapes, under couch cushions and along cracks and crevices. This procedure will be accomplished using both a Residual Adulticide which kills adult fleas for up to 30 days and an Insect Growth Regulator which stops fleas from reproducing for 7 months.

It is crucial that these instructions are carried out prior to treatment so that our service technician can start treatment immediately. If not, it is at the discretion of the Service Technician at Complete Pest Control if treatment will be made and if warranty will be available for treatment. Should the unit need to be rescheduled, there will be a rescheduling fee of \$150.00. By signing this Prep Sheet, the customer has read and fully understands the provisions of this Prep Sheet with all its terms and conditions without limitations.

Customer: \_\_\_\_\_ Date: \_\_\_\_\_

By: \_\_\_\_\_ Date: \_\_\_\_\_

(Complete Pest Control Representative)