

REQUEST FOR INSECT IDENTIFICATION

PLEASE FILL IN ALL SECTIONS OF THIS FORM.

YOUR NAME:	DATE:
COMPANY NAME IF APPLICABLE:	
ADDRESS:	TEL NO:
	MOBILE NO:
	Email address:
Type of premises?	
Where in the premises were the insects found?	
How long has it been going on for?	
Approx. how many insects were present?	
Were the insects larvae, pupae, adult, nymph?	
MORE DETAILS – ANYTHING OF INTEREST	
If samples are attached please ensure they are protected and not squashed. Please attach images or email them to info@cimexine.com including your name, address and telephone number.	
BRITISH BUG CONTROL, UNIT 2 EAGLETHORPE BARNES, WARMINGTON, PE8 6TJ	