

Container Fumigation Compliance Inspection Form

General Information

Inspection Date

Inspector Name

Company Name

Location

Container Number

Type of Goods

Fumigation Details

Fumigant Used

Fumigation Date

Exposure Time (hours)

Fumigation Certificate No.

Inspection Checklist

Warning Signs Posted

Container Properly Sealed

Leak Detection Performed

PPE Worn by Workers

Ventilation After Fumigation Completed

Residue/Contamination Check

Additional Notes/Observations

Inspector Signature

Signature

Date