

Exterminator Service Form

Exterminators are expected to disinfect and remove infestation by-products (droppings, carcasses, nesting, etc.) from the occupational area. The **occupational area** comprises of all areas normally accessed by a passenger. A list of examples that comprise of the occupational area can be found below. These are not exhaustive lists.

Exterminator Information	Service Information	Vehicle Information
Company Name	Time In	Year
Company Address	Time Out	Make
Representative Name	Date (dd/mm/yyyy)	Model
Registered Account Number		Odometer Reading
		VIN

Service Checklist

- ☐ The infestation/damage is too severe to proceed. Send photos to the Adjusting Team.

All Vehicles	Trailer/RV
<input type="checkbox"/> Confirm vehicle is/was infested <input type="checkbox"/> Active infestation (if yes, add Notes on environmental conditions) <input type="checkbox"/> Take pictures of infestation evidence and any visible rodent damage (example: chewed panels) <input type="checkbox"/> Removal of droppings and by-products <input type="checkbox"/> Consult customer regarding disposal of personal items that cannot be disinfected <input type="checkbox"/> Collect payment from customer up to the deductible amount <input type="checkbox"/> Provide customer with completed customer copy <input type="checkbox"/> Advise customer to provide customer copy to the remediation shop <input type="checkbox"/> Provide this completed form and a copy of the Customer Copy to Manitoba Public Insurance	<input type="checkbox"/> Disinfect occupational areas and hard surfaces, including but not limited to: <ul style="list-style-type: none"> Inside drawers, cabinets, and closets Counters and stovetops Floors and carpeting Shower Exterior-access storage Small storage areas (glove box, door slots, etc) Cup holders Seats including underneath (if accessible) Carpeting Seating and sleeping areas Slide openings <input type="checkbox"/> Bag all personal belongings

Image Requirements	Passenger Vehicles
1 image before disinfecting begins 1 image of the VIN 2 images of the corner exterior Interior images as required (include rodent damage) 1 image after disinfecting complete	<input type="checkbox"/> Disinfect occupational area, including but not limited to: <ul style="list-style-type: none"> Small storage areas (glove box, door slots, etc) Cup holders Seats including underneath (if accessible) Carpeting Car Seats Spare wheel well Trunk

Notes

Expense Report – Rodent Infestation Claim

Disinfecting and By-Product Removal by Vehicle Type		
Light Cars and Light Duty Trucks	\$160.00	<input type="checkbox"/>
Camper Trailer	\$180.00	<input type="checkbox"/>
Trailer - Less than 17 feet	\$250.00	<input type="checkbox"/>
Trailer - Between 17 and 24 feet	\$400.00	<input type="checkbox"/>
Trailer - Between 25 and 29 feet	\$550.00	<input type="checkbox"/>
Trailer/RV – 30 feet or more	\$650.00	<input type="checkbox"/>
Commercial Truck - Without Sleeper	\$180.00	<input type="checkbox"/>
Commercial Truck - With Sleeper	\$280.00	<input type="checkbox"/>
Customer Responsible for GST²	Deductible	
<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> \$100	<input type="checkbox"/> \$300
Travel Allowance	<input type="checkbox"/> \$150	<input type="checkbox"/> \$500
Kilometers	<input type="checkbox"/> \$200	<input type="checkbox"/> \$800

Expenses	
Flat Rate	
Travel (\$0.80/km)	
Eradication (light cars or trucks \$75)	
Eradication(trailers \$150)	
Other with Explanation ¹	
GST	
PST	
Total	
Customer Deductible	
Customer Paid	
Amount Outstanding (less Customer Paid)	
Administrative Fee (\$15.00 + tax) ³	\$16.80
Total Billed to MPI	

Other ¹		
Expense Description	Explanation	Cost

¹ Approval for items in the Other section will be at the discretion of Manitoba Public Insurance.

² If yes, the customer must pay for the total amount of GST on the claim (except the Administrative Fee)

³ Do not charge the customer the Administrative Fee.

These signatures certify that the services (outlined in the Service Checklist) were provided to completion.

Representative Signature

Customer Signature

Exterminator Service Form – Customer Copy

Please make two copies of this form. One for the customer and one for MPI.

Exterminator Information
Company Name
Representative Name

Service Information
Customer Name
Service Date (dd/mm/yyyy)

Vehicle Information
Plate Number
Deductible Amount

Service Checklist

- ☐ Confirm vehicle is/was infested
- ☐ Disinfect occupational area
- ☐ Removal of droppings and by-products
- ☐ Consult claimant regarding disposal of personal items that cannot be disinfected
- ☐ Collect payment from customer up to the deductible amount
- ☐ Provide customer with completed customer copy
- ☐ Advise customer to provide customer copy to the remediation shop

Amount Collected from Customer
\$

Notes

Representative Signature

Customer Signature