



Hello valued BSG Customers,

Thank you for taking the time to be a part of our food safety and quality control programs. We are committed to resolving your concern in a timely manner to identify the root cause(s) and develop a corrective action plan to manage this pest situation. Since all pest complaints are time sensitive, your immediate attention as the reporter is an essential component in moving this pest investigation process forward.

Please take the time to complete the form below. Also, include any supporting documents, photos, and videos with this form. Please understand BSG's internal and audit investigation processes cannot begin until the information below is fully completed and submitted.

BSG's guidelines on receipt, storage and pest management practices are included with this form to be used as reference source in completing the full details of this pest complaint.

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1. Have you reviewed the Receipt, Storage and Pest Management Best Practices resource that was attached?

a. Do your programs meet the best practices outlined in the guidance?

Comments: \_\_\_\_\_

2. Product Description and SKU(s): \_\_\_\_\_

3. Product Batch/Lot Code(s): \_\_\_\_\_

4. Number of days product has been in inventory: \_\_\_\_\_  
(pest-affected product specifically and the oldest inventory)

5. Was product thoroughly inspected upon receipt?

a. Was the inspection documented?

Comments: \_\_\_\_\_

6. How was the pest noticed and when? \_\_\_\_\_

7. Who identified the pest? \_\_\_\_\_

a. Have you retained a sample of the pest in a Zip-style bag, or any other secure container so it can be positively identified by our pest management service provider?

Comments: \_\_\_\_\_

8. Were bags opened to see if pests were observed inside bags?

- a. Activity inside of bags?
- b. Activity inside or outside of pallet wrap?

Comments: \_\_\_\_\_

9. Storage conditions

a. Type of storage: \_\_\_\_\_

(e.g., designated space or shared space with milling/brewing/tap room/entertainment space)

- b. Is there documented regularly schedule cleaning and sanitation of the area?
- c. Are partial bags transferred to tote-bins (Rubbermaid style)?
- d. Are there open or spilled bags present?

List type(s): \_\_\_\_\_

Comments: \_\_\_\_\_

10. What actions have been taken to mitigate the spread of pests to this point?

a. Has affected product been quarantined or otherwise handled to prevent spread to unaffected product?

Describe: \_\_\_\_\_

b. Has your pest management service provider suggested a plan for regaining control?

Describe: \_\_\_\_\_

Comments: \_\_\_\_\_

11. Do you mill on site?

a. Pest treatment program in place specific to the mill?

b. Last date of treatment: \_\_\_\_\_

Comments: \_\_\_\_\_

12. Do you have Silos on site?

- a. Pest treatment and cleaning programs in place?
- b. Last date of treatment and/or cleaning: \_\_\_\_\_
- c. Silo empty schedule in place?
- d. Last date emptied: \_\_\_\_\_

Comments: \_\_\_\_\_

13. Do you have a pest management program?

- a. How often does a technician visit? \_\_\_\_\_
- b. Does the program address rodents?
- c. Does the program address stored product pests?
  - i. With pheromone monitors (dome/hanging)?  
Recent activity? \_\_\_\_\_
  - ii. With any treatments (crack/crevice/spot)?

Comments: \_\_\_\_\_

14. Do you store grains from a company besides BSG?

- a. Is there any pest activity associated with this non-BSG product/s?

Comments: \_\_\_\_\_

15. List neighboring businesses that may be affecting your pest management program success (bakeries, grain elevators, restaurants etc.):

\_\_\_\_\_