

# AREA UNDER FUMIGATION

Name of fumigant: PROFUME (Sulphuryl Fluoride)

Toxic gas



**DANGER**  
**INGOZI**

**NO ENTRY**  
**AKUNGENWA**

**NOKUNGENA**  
**HO HO KENOE**

## Fumigation Company:

Company Name:

Address:

Office No :

Email Address:

Certified applicator:

Cell No:

P Registration no:

## Fumigation Dates & times

	Dates	Times
From:	.....	.....
To:	.....	.....