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[Property Owner/Property Manager Letterhead or Name]
[Street Address of Property]
[City, State, Zip Code]
[Phone Number]
[Email Address]

Date: [Insert Date]

NOTICE OF PEST CONTROL TREATMENT

California Civil Code § 1940.8 & Business & Professions Code § 8538 Notice

Dear Tenant(s),

This notice is to inform you that **licensed pest control services** will be performed at:

[Property Address / Unit Number(s)]

as part of our ongoing maintenance efforts to ensure a safe and habitable environment.

Pest Control Treatment Details

- **Date of Scheduled Treatment:** [Insert Date]
- **Time Frame for Treatment:** [Insert Start Time] to [Insert End Time]
- **Areas to Be Treated:** [e.g., Individual units, common areas, exterior grounds, crawl spaces, etc.]
- **Target Pest(s):** [e.g., Cockroaches, ants, bed bugs, rodents, etc.]

Pest Control Company Information

- **Company Name:** [Insert Licensed Pest Control Company Name]
- **Company Address:** [Insert Company Address]
- **Phone Number:** [Insert Company Phone Number]
- **Structural Pest Control Board License #:** [Insert License Number]

Pesticides to Be Used

Product Name	Active Ingredient(s)	EPA Registration Number
[Insert Name]	[Insert Ingredient]	[Insert Number]
[Add additional rows as needed]		



NOTE: You may request a copy of the **Safety Data Sheet (SDS)** for each pesticide listed above from the pest control operator or the property manager.

Important Tenant Instructions

To ensure your safety and the effectiveness of treatment:

- **Vacate the unit during treatment** and do not return until the **re-entry time** specified by the pest control company.
- **Re-entry permitted after:** [Insert Time or Duration, e.g., “4 hours after completion”]
- **Secure all food, utensils, and personal items** before the scheduled treatment.
- **Inform management of any medical conditions, allergies, or sensitivities** that could be affected by pesticide exposure.
- **If you have pets, ensure they are removed or secured appropriately** during the treatment window.

Legal Notice & Tenant Rights

This notice is provided in compliance with:

- **California Civil Code § 1940.8**, which requires disclosure of pest control activities affecting dwelling units.
- **California Business & Professions Code § 8538**, requiring advance written notice from pest control operators.
- **Alameda County** housing habitability standards regarding chemical use and tenant safety.

If you have questions about the treatment or would like additional information about the products used, you may contact:

- **Property Management:** [Insert Phone and Email]
- **Pest Control Operator:** [Insert Phone]
- **California Structural Pest Control Board:** (916) 561-8704 | www.pestboard.ca.gov

Thank you for your cooperation in maintaining a clean and pest-free environment.

Sincerely,

[Property Owner/Property Manager Name]
[Title, if applicable]
[Signature, optional if sent digitally or posted]