

## AMIC FOOD SAFETY PLAN – FORM NUMBER NINE A

**BAIT STATION SITE PLAN** 

To be completed when a new station is designated

Completed buy	Data	
Completed by:	Date:	

	Bater
Operator authorisation:	Date:
	Date.



## AMIC FOOD SAFETY PLAN – FORM NUMBER NINE A

**BAIT STATION SITE PLAN** 

To be completed when a new station is designated

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Completed by:	Date:
Operator authorisation:	Dato:
Operator authorisation:	Date: