



How to complete a Record of fumigation (ROF)

This fact sheet explains the mandatory information required in a ROF for fumigations performed under the Methyl bromide fumigation methodology v3.0. *Section 12.2* of the methodology defines all mandatory information.

A ROF must:

- be completed for every treatment, including failed treatments
- be completed at the fumigation site as the tasks are performed
- be kept for 2 years
- not contain false or misleading information.

ROF template

Use of the ROF template (*Appendix 1 and Appendix 2*) is **not mandatory**. It is provided as a resource to help you prepare your own ROF. The template may assist you in meeting the required conditions; however, compliance is determined by whether your ROF includes all requirements outlined in Section 12 of the Methyl Bromide Fumigation Methodology v3.0.

Some sections of the template have been included based on feedback from industry to make the tool more practical and user-friendly.

Ensure your documents or IT systems align with the requirements in Section 12. Do not rely on the template alone to determine compliance.

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(Insert your business logo or letterhead)
(Including address as it appears on the treatment provider list)

Record of fumigation – Methyl bromide fumigation (non-perishable commodity)										
Section A: Fumigator in charge					Section B: Job details					
Full Name		Accreditation number (if applicable)			Client name/details		Job identification number			
Treatment provider ID					Description of consignment					
Location of fumigation					Target of fumigation					
Street address		Suburb/Town/City			Country		Postcode			
Consignment identification/Container numbers										
Section C: Fumigation details					Section D: Concentration readings					
Specified treatment schedule		Enclosure type (select one)			Enclosure volume					
Dose rate (g/m ³)		Exposure period (hrs)			<input type="checkbox"/> Sheeted enclosure <input type="checkbox"/> Fumigation chamber <input type="checkbox"/> Un-sheeted container(s) <input type="checkbox"/> Other _____		Length (m)			
<input type="checkbox"/> Yes – consignment suitable for fumigation? <input type="checkbox"/> No – remedial action taken If no, what action?		Total volume (m ³)			Height (m)		Width (m)			
Fumigation type (select one)		Dose rate used (g/m ³)			Calculated dose (g)					
<input type="checkbox"/> Ambient temperature: Forecast min temp °C/°F <input type="checkbox"/> Controlled temperature: Min enclosure temp °C/°F		Chloropicrin <input type="checkbox"/> Yes <input type="checkbox"/> No			if yes: %					
Heaters used? <input type="checkbox"/> Yes <input type="checkbox"/> No		Amount Chlor applied (g)								
Section D: Concentration readings Monitoring readings by locations - Each reading must be initiated by the fumigator(s) who took the reading										
Serial number of monitoring device(s)										
	1	2	3	4	5	Equilibrium result (%)	Standard (g/m ³)	Date (dd/mm/yy)	Time (hh:mm)	Fumigator/s initials
	Time and date fumigation began/finished					%				
Start										g/m ³
During										g/m ³
End										g/m ³
	Time and date enclosure ventilation start									g/m ³
	Final TVV readings (all)					ppm	ppm	ppm	ppm	g/m ³
Top-up details										
Amount (g/m ³)	Time (h:mm)			Concentration (g/m ³)						
Section E: Fumigator declaration - To be completed by the fumigator in charge named in Section A of this record										
I, the Fumigator in charge declare that the fumigation was conducted in accordance with the treatment schedule and all the requirements in the Methyl Bromide Fumigation Methodology, and the information I have provided is true and correct.										
Signature					Date (dd/mm/yyyy)			Fumigation result (Pass/Fail)		
Government officer if supervised					Name			Signature		

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This factsheet will cover each section of the ROF:



@

Any questions? Please email us at:
offshoretreatments@aff.gov.au

Tip: Using field notes

If you use field notes to complete the ROF, these field notes must be kept with the fumigation documentation for 2 years.



If field notes are used at the time of fumigation to record fumigation details and transcribe the information later, these field notes form part of the official record and must be kept with the fumigation documentation for two years.

The original field notes must be kept with the fumigation records. This helps show what happened during the treatment and reduces the risk of transcription errors. Without the original notes, it can be harder to confirm compliance or resolve discrepancies during audits.

For offshore treatment providers registered under AusTreat or AFAS that use the certificate portal, the field notes must be uploaded into the certificate portal with the original ROF. Field notes presented later may not be accepted as evidence.



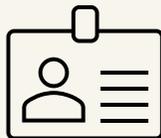
Section A: Fumigator in charge

Complete this section with the details of the fumigator in charge. The person named here must also complete the declaration in Section E of the form.



Fumigator in Charge: The licenced and/or accredited individual that is responsible for the conduct of the fumigation at the time specific fumigation activities are undertaken.

Refer to: Clause 12.2.5 (t), and Glossary



Accreditation number: This is a number associated with an individual and relates to the fumigator-in-charge who will be signing the form. For example, fumigation licence number.

Not a mandatory field – Refer to relevant import/export policy for details.

Record of fumigation – Methyl bromide fumigation (non-perishable commodity)		
Section A: Fumigator in charge		
Full Name	Rachael Eatock	Accreditation number (if applicable)
Section B: Job details		
Treatment provider ID		Client name/details
Job identification number		
Location of fumigation		Description of consignment
Street address		Target of fumigation
Suburb/town/city		
Country	Postcode	
Consignment identification/Container numbers		



More information

Web - [Methodologies and documents for biosecurity treatments – DAFF](#)
Email - offshoretreatments@aff.gov.au

Section B: Job details

Complete this section with information about **where** the fumigation was carried out and **who** it was completed for. Include site details, client information, and any references that link the fumigation to a specific consignment.



Treatment Provider ID: Number issued by regulatory authority.

E.g. AEI, AA number, RE number.

Refer to: Clause 12.2.5 (a)



Job Identification Number: Number that a company may use to identify a certain job.

Not a mandatory field



Location of fumigation: The location (site address) where the fumigation is performed.

Refer to: Clause 12.2.5 (d)

Record of fumigation – Methyl bromide fumigation (non-perishable commodity)	
Section A: Fumigator in charge	
Full Name	Accreditation number (if applicable)
Section B: Job details	
Treatment provider ID	IN40547TP
Job identification number	
Location of fumigation	
Street address	Maharashtra State Highway 237
Suburb/town/city	Yavatmal, Maharashtra
Country	INDIA Postcode 445001
Consignment identification/Container numbers	



Client name: The person or company that had requested the fumigation. Usually the person responsible for the goods.

Refer to: Clause 12.2.5 (b)



Consignment identification

Container number(s), bill of lading, silo/shed number or other means to clearly identify the consignment.

Refer to: Clause 12.2.5 (g)

Record of fumigation – Methyl bromide fumigation (non-perishable commodity)	
Section A: Fumigator in charge	
Full Name	Accreditation number (if applicable)
Section B: Job details	
Treatment provider ID	
Job identification number	
Location of fumigation	
Street address	
Suburb/town/city	
Country	Postcode
Consignment identification/Container numbers	
TRLU1234567	



More information

Web - [Methodologies and documents for biosecurity treatments – DAFF](#)

Email - offshoretreatments@aff.gov.au

Section B: Job details - continued

Complete this section with information about **where** the fumigation was carried out and **who** it was completed for. Include site details, client information, and any references that link the fumigation to a specific consignment.



Description of consignment: Provide a clear description of what is being fumigated and the consignment contents. This helps confirm exactly what the treatment covered. For example:

- “Treating timber backing for seats in a sheeted stack”
- “Fumigating empty sea container and dunnage”
- “Treating rice in 25kg bags. Also, in container retail ready spices not requiring treatment”.

This information ensures the treatment can be accurately assessed and verified.

Refer to: Clause 12.2.5 (e)



Target of fumigation

The specific object or area that is intended to be treated through the fumigation process. The target of fumigation may be the commodity, packaging material, container, or conveyance or combination of these.

Refer to: Clause 12.2.5 (f)

Record of fumigation – Methyl bromide fumigation (non-perishable commodity)			
Section A: Fumigator in charge			
Full Name		Accreditation number (if applicable)	
Section B: Job details			
Treatment provider ID		Client name/details	
Job identification number			
Location of fumigation		Description of consignment	
Street address		15 Tonne – White rice	
Suburb/town/city		Target of fumigation	
Country		White rice and sea container	
Postcode			
Consignment identification/Container numbers			



Important: Accurate recording of the target of fumigation helps provide a clear picture if a live pest is detected in a consignment.

For example: If the fumigator treats only the timber dunnage and a pest is later found within the goods, like rice, the fumigator may not be held accountable

Tip: Description of the consignment for multiple sea containers in a sheeted enclosure



If fumigating multiple sea containers under a sheeted enclosure and the contents or treatment targets differ, each container may require a separate approach.

Variations in consignment description, treatment targets, and suitability mean that a general description may not ensure compliance for all containers.

Careful assessment of each consignment is essential to meet biosecurity requirements, and you must record the consignment and fumigation target details for every sea container in this situation.



More information

Web - [Methodologies and documents for biosecurity treatments – DAFF](#)
Email - offshoretreatments@aff.gov.au

Section C: Fumigation Details

Complete this section with the specific details of the fumigation treatment being performed.

Specified treatment schedule

Specific treatment rates, exposure period and rules as imposed by the relevant authority – usually the importing jurisdiction. The treatment schedule will specify dose rate, exposure period and temperature. Some treatment schedules have additional requirements including, but not limited to, load factor and minimum end point readings.



Dose Rate: The prescribed concentration of methyl bromide to be used per unit of volume and the exposure period e.g. 48g/m³. Refer to: *Glossary*



Exposure Period: The amount of time, in one continuous block, that the consignment must be exposed to sufficient concentration levels of methyl bromide to be lethal to the targeted pests. Refer to: *Section 8.6*



Temperature: record the

- forecast minimum temperature (°C) or
- minimum temperature achieved in the enclosure or

Refer to: *Section 12.3.3 (r)*

Specified treatment schedule			Enclosure type (select one)	
Dose rate (g/m ³)	Exposure period (hrs)	Temperature (°C)	<input type="checkbox"/> Sheeted enclosure <input type="checkbox"/> Fumigation chamber <input type="checkbox"/> Un-sheeted container(s) <input type="checkbox"/> Other _____	
80 g/m ³	48	21C		
Consignment suitability (Section 3 of the methodology)			Enclosure volume	
Was the consignment suitable for fumigation?			Length	Height
<input type="checkbox"/> Yes – consignment suitable <input type="checkbox"/> No – remedial action taken			Width (m)	
If no, what action?			Total volume (m ³)	
Fumigation type (select one)			Dose	
<input type="checkbox"/> Ambient temperature: Forecast min temp °C/°F			Dose rate used (g/m ³)	
<input type="checkbox"/> Controlled temperature: Min enclosure temp °C/°F			Calculated dose (g)	
Heaters used? <input type="checkbox"/> Yes <input type="checkbox"/> No			Chloropicrin <input type="checkbox"/> Yes <input type="checkbox"/> No If yes: %	
			Amount CH ₃ Br applied (g)	



Consignment suitability: Assess the suitability of the consignment as per the methodology and then record the result. Refer to: *Section 3*

Before a fumigation can proceed, the consignment must be made suitable in accordance with the methodology. If it cannot be made suitable, the treatment must not go ahead. You need to check things like:

- **packaging and wrappings:** remove or perforate anything that blocks gas penetration
- **Arrangement of goods:** ensure gas can circulate to the target of fumigation; do not exceed 80% load for perishables
- **timber and coatings:** surfaces must not be sealed or coated in a way that prevents gas access

Specified treatment schedule			Enclosure type (select one)	
Dose rate (g/m ³)	Exposure period (hrs)	Temperature (°C)	<input type="checkbox"/> Sheeted enclosure <input type="checkbox"/> Fumigation chamber <input type="checkbox"/> Un-sheeted container(s) <input type="checkbox"/> Other _____	
Consignment suitability (Section 3 of the methodology)			Enclosure volume	
Was the consignment suitable for fumigation?			Length	Height
<input checked="" type="checkbox"/> Yes – consignment suitable <input type="checkbox"/> No – remedial action taken			Width (m)	
If no, what action?			Total volume (m ³)	
Fumigation type (select one)			Dose	
<input type="checkbox"/> Ambient temperature: Forecast min temp °C/°F			Dose rate used (g/m ³)	
<input type="checkbox"/> Controlled temperature: Min enclosure temp °C/°F			Calculated dose (g)	
Heaters used? <input type="checkbox"/> Yes <input type="checkbox"/> No			Chloropicrin <input type="checkbox"/> Yes <input type="checkbox"/> No If yes: %	
			Amount CH ₃ Br applied (g)	



Section C: Fumigation Details

Complete this section with the specific details of the fumigation treatment being performed.



Enclosure type

Record the type of enclosure you performed the fumigation in. Fumigations are conducted in a variety of different enclosures; different conditions apply to different enclosure types. Refer to: Clause 12.2.5 (i) and Glossary

Sheeted enclosure

An enclosure created under a gas-proof sheet that is covering and enclosing the target of fumigation. Includes sheeted sea containers and sheeted stacks. Section 4.2

Fumigation Chamber

A gas-tight fumigation enclosure with an inbuilt extraction system. All requirements for fumigation chambers specified in section 4.3 Fumigation chambers. Section 4.3

Un-sheeted container

Sea container suitable for fumigation. Section 4.1

Specified treatment schedule			Enclosure type (select one)		
Dose rate (g/m ³)	Exposure period (hrs)	Temperature (°C)	<input type="checkbox"/> Sheeted enclosure <input type="checkbox"/> Fumigation chamber <input checked="" type="checkbox"/> Un-sheeted container(s) <input type="checkbox"/> Other _____		
Consignment suitability (Section 3 of the methodology)			Enclosure volume		
Was the consignment suitable for fumigation?			Length	Height	Width (m)
<input type="checkbox"/> Yes – consignment suitable <input type="checkbox"/> No – remedial action taken			Total volume		(m ³)
If no, what action?			Dose		
Fumigation type (select one)			Dose rate used	(g/m ³)	
<input type="checkbox"/> Ambient temperature: Forecast min temp °C/°F			Calculated dose	(g)	
<input type="checkbox"/> Controlled temperature: Min enclosure temp °C/°F			Chloropicrin <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes: %	
Heaters used? <input type="checkbox"/> Yes <input type="checkbox"/> No			Amount CH ₃ Br applied	(g)	



If the enclosure that you use is not listed, for example silo or ship hold provide these details under 'other', or you can change your ROF to suit your needs.

Specified treatment schedule			Enclosure type (select one)		
Dose rate (g/m ³)	Exposure period (hrs)	Temperature (°C)	<input type="checkbox"/> Sheeted enclosure <input type="checkbox"/> Fumigation chamber <input type="checkbox"/> Un-sheeted container(s) <input type="checkbox"/> Other _____		
Consignment suitability (Section 3 of the methodology)			Enclosure volume		
Was the consignment suitable for fumigation?			Length	Height	Width (m)
<input type="checkbox"/> Yes – consignment suitable <input type="checkbox"/> No – remedial action taken			Total volume		(m ³)
If no, what action?			Dose		
Fumigation type (select one)			Dose rate used	(g/m ³)	
<input checked="" type="checkbox"/> Ambient temperature: Forecast min temp 28°C °C/°F			Calculated dose	(g)	
<input type="checkbox"/> Controlled temperature: Min enclosure temp °C/°F			Chloropicrin <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes: %	
Heaters used? <input type="checkbox"/> Yes <input type="checkbox"/> No			Amount CH ₃ Br applied	(g)	



Fumigation Type

Record the type of fumigation performed. Fumigations can be either temperature-controlled fumigation or subject to the ambient temperature. Refer to: Clause 8.2.4

Ambient temperature fumigation

The enclosure being fumigated is subject to environmental ambient temperatures or outdoors.

Controlled temperature fumigation

An artificial heat source is used to heat and maintain the temperature of an enclosure during a fumigation.



Section C: Fumigation Details - continued

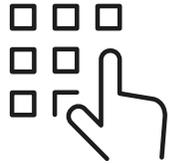
Complete this section with the specific details of the fumigation treatment being performed.



Enclosure Volume

Record the enclosure dimensions and calculate enclosure volume.
Total volume = Height x depth x length.
Refer to clauses 8.2.2, 8.2.3

Specified treatment schedule			Enclosure type (select one)	
Dose rate (g/m ³)	Exposure period (hrs)	Temperature (°C)	<input type="checkbox"/> Sheeted enclosure <input type="checkbox"/> Fumigation chamber <input type="checkbox"/> Un-sheeted container(s) <input type="checkbox"/> Other _____	
Consignment suitability (Section 3 of the methodology)			Enclosure volume	
Was the consignment suitable for fumigation?			Length	Height
<input type="checkbox"/> Yes – consignment suitable <input type="checkbox"/> No – remedial action taken			12.2	2.6
			Width	(m)
			2.5	
			Total volume	79.3 (m ³)



Dose

In this section show your working for how the amount of fumigant applied was calculated.

Dose rate used The rate used after temperature has been taken into consideration. This is the number used to calculate the dose.
Refer to: Section 6 and 8.1

Calculated dose: The weight of methyl bromide required to meet the treatment schedule. The calculation is: Dose rate used x Enclosure volume (account for chloropicrin if required).
Refer to: clause 8.2

Chloropicrin: If the methyl bromide is mixed with another gas, compensation must be made to the dose amount, so the full amount of methyl bromide required is injected into the enclosure. Record the percentage of chloropicrin in the methyl bromide.
Refer to: Clause 8.2.4

Specified treatment schedule			Enclosure type (select one)	
Dose rate (g/m ³)	Exposure period (hrs)	Temperature (°C)	<input type="checkbox"/> Sheeted enclosure <input type="checkbox"/> Fumigation chamber <input type="checkbox"/> Un-sheeted container(s) <input type="checkbox"/> Other _____	
Consignment suitability (Section 3 of the methodology)			Enclosure volume	
Was the consignment suitable for fumigation?			Length	Height
<input type="checkbox"/> Yes – consignment suitable <input type="checkbox"/> No – remedial action taken				Width (m)
			Total volume	(m ³)
If no, what action?			Dose	
Fumigation type (select one)			Dose rate used	48 (g/m ³)
<input type="checkbox"/> Ambient temperature: Forecast min temp °C/°F			Calculated dose	3806.4 (g)
<input type="checkbox"/> Controlled temperature: Min enclosure temp °C/°F			Chloropicrin <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If yes: %
Heaters used? <input type="checkbox"/> Yes <input type="checkbox"/> No			Amount CH ₃ Br applied	3900 (g)

In this situation the scales can only measure to 100g increments so must be rounded up to 3900g (3.9kg).



Amount CH₃Br applied: This is the 'dose'. The actual volume of methyl bromide injected into the enclosure, expressed as weight of methyl bromide. Once the dose is calculated, the amount must be rounded up to the next increment that can be accurately measured by the equipment used to dispense methyl bromide. If methyl bromide is supplied in cans, the dose must be rounded up to the next full can. Refer to: Clause 8.2.5



Section D: Concentration readings

Complete this section with the concentration readings taken during all stages of the fumigation.

Refer to: Clause 12.2.5 (p).

The sections must be completed as follows:

Serial number of monitoring devices:

Record the serial number of the gas concentration monitoring device(s) used. Record a minimum of the last 4 digits of the serial number for each device used. Refer to: Clause 12.2.5(r)

Concentration readings (g/m³):

Record readings from all monitoring locations exactly as shown by the device. For example, you must put 4.3 if your device reads 4.3 not 4 or ">4".

Final TLV readings: Record the TLV with the date and time it was taken. If the first reading is below 5ppm, you only need to record that one. Extra space is provided if more readings are needed. Refer to: Clause 12.2.5 (s)

Equilibrium: Record the results of the equilibrium calculations. If more than one calculation is required record all the results. Refer to: Section 8.5, 12.2.5 (q)

$$\text{Equilibrium \%} = \frac{\text{Highest reading} - \text{lowest reading}}{\text{Lowest reading}} \times 100$$

Date/Time: Record the date and time the concentration readings are taken. Record the time after the readings are taken for concentration reading stage, not at the start. Refer to: 12.2.5 (p)

Fumigator's initials: Record the initial or signature of the fumigator who took the readings at each concentration reading stage and TLV reading. This may be different for each stage and can be different to the fumigator in charge. Refer to: 12.2.5 (u)

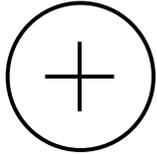
Section D: Concentration readings Monitoring readings by locations - Each reading must be initialised by the fumigator(s) who took the reading											
Serial number of monitoring device(s)		1234, 3698									
	1	2	3	4	5	Equilibrium result (%)	Standard (g/m ³)	Date (dd/mm)	Time (hh:mm)	Fumigator/s initials	
								Time and date: Fumigant injection finished			
Start	97.2	100.4	99.0			3.3 %	68	17/10	6:25 am/pm	JK	
						%		17/10	6:42 am/pm	JK	
During	55.0	55.2	55.0				24	18/10	7:04 am/pm	JK	
									am/pm		
End	37.6	37.4	37.4				20	19/10	7:37 am/pm	RE	
									am/pm		
								Time and date: Enclosure ventilation start			
Final TLV readings (all)						ppm	ppm	1 ppm	19/10	8:01 am/pm	RE
Top-up details											
Amount (g)				Time (hh:mm)			Concentration (g/m ³)				

Standard (g/m³): Record the standard concentration required for the time the concentration readings were taken. Refer to: Appendix 4: Methyl bromide monitoring tables, 12.2.5 (k)

Time and date: Enclosure ventilation start: record the time and date when enclosure ventilation starts.



Section D: Concentration readings



Top-up details

If a top-up is performed, record the information in this section.

All top-ups must be recorded on the ROF.

Amount (g): this is the additional dose injected. Top-up amount (g) = Enclosure volume (m³) x (Maximum to allow top-up – Lowest concentration reading): *Refer to: Clause 10.3.1, 12.2.10. The template in the methodology 3.0 has a typographic error. Amount should state 'g' not 'g/m3'*

Time: Time additional fumigant was injected. *Refer to: Clauses 10.3.1, 12.2.10.*

Concentration (g/m³): Concentration reading taken from the monitoring location that had the lowest reading to verify that the methyl bromide is at or above the standard concentration. *Refer to Clause 10.3.4, 10.3.5. 12.2.10.*

Section D: Concentration readings Monitoring readings by locations - Each reading must be initialised by the fumigator(s) who took the reading										
Serial number of monitoring device(s)										
	1	2	3	4	5	Equilibrium result (%)	Standard (g/m ³)	Date (dd/mm)	Time (hh:mm)	Fumigator/s initials
Time and date: Fumigant injection finished										am/pm
Start						%				am/pm
						%				am/pm
During										am/pm
										am/pm
End										am/pm
										am/pm
Time and date: Enclosure ventilation start										am/pm
Final TLV readings (all)						ppm	ppm	ppm		am/pm
Top-up details										
Amount (g)					Time (hh:mm)			Concentration (g/m ³)		

Section E: Fumigation declaration



Complete this section with your declaration that the fumigation complied with all relevant conditions and the information on the ROF is true and correct. The fumigator in charge, as named in Section A must sign and date the ROF. *Refer to: Section 12.2.5 (t)*

Fumigation results

You must indicate if the fumigation was a pass or fail. ROF's of failed fumigations must also be kept for 2 years. *Refer to: Clause 12.2.3.*

Section E: Fumigator declaration - To be completed by the fumigator in charge named in Section A of this record		
I, the fumigator-in-charge declare that the fumigation was conducted in accordance with the treatment schedule and all the requirements in the Methyl Bromide Fumigation Methodology, and the information I have provided is true and correct.		
Signature 	Date (dd/mm/yyyy) 18/10/2025	Fumigation result (Pass/Fail) Pass

