

PESTICIDE USE REPORT

☐ Nursery

County No.	Section	Township <input type="checkbox"/> N <input type="checkbox"/> S	Range <input type="checkbox"/> E <input type="checkbox"/> W	Base & Meridian S M H <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	App. Method Air <input type="checkbox"/> Ground <input type="checkbox"/> Other <input type="checkbox"/>	Permittee/Property Operator	Applicator Name and Address	
Operator ID/Permit No.					Site Identification Number	Total Planted Acres/Units		
Location					Block ID (If Applicable)			
Date/Time Applied		Acres/Units Treated		Commodity/Site Treated		<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>		
Chem No	Manufacturer/Name of Product Applied			EPA/Calif. Registration No. From Label		Total Product Used	Rate	Dilution
				- - -		<input type="checkbox"/> LB <input type="checkbox"/> OZ <input type="checkbox"/> PT <input type="checkbox"/> QT <input type="checkbox"/> GA		
				- - -		<input type="checkbox"/> LB <input type="checkbox"/> OZ <input type="checkbox"/> PT <input type="checkbox"/> QT <input type="checkbox"/> GA		
				- - -		<input type="checkbox"/> LB <input type="checkbox"/> OZ <input type="checkbox"/> PT <input type="checkbox"/> QT <input type="checkbox"/> GA		
				- - -		<input type="checkbox"/> LB <input type="checkbox"/> OZ <input type="checkbox"/> PT <input type="checkbox"/> QT <input type="checkbox"/> GA		
				- - -		<input type="checkbox"/> LB <input type="checkbox"/> OZ <input type="checkbox"/> PT <input type="checkbox"/> QT <input type="checkbox"/> GA		
				- - -		<input type="checkbox"/> LB <input type="checkbox"/> OZ <input type="checkbox"/> PT <input type="checkbox"/> QT <input type="checkbox"/> GA		
Days Reentry		Days Preharvest		Applied/Supervised By				

Submit to AGRICULTURAL COMMISSIONER within 7 days of application.