Chemical Application Record

ALL SECTIONS MUST BE COMPLETED IN FULL!

NOTE: Application information must be completed on the same day as the application and must be retained for seven years (Ref. RCW 17.21)

1. Name & Address of Person for Whom Pesticide Was Applied	2. Applicator Name and Address (if different from (1)):
RANCH :_____	Tel. No. Lic. No.
3. Address or exact location of application (NOTE: If the application is made to one acre or more of agricultural land, the field location must be shown on the map on page two of this form)	4. Misc. Info. : Tractor Number Sprayer/Spreader Number 5. Equipment Details:

5. Date & Time of Application	6. Crop or Site Treated	7. Acres Treated	8. Product Name	9. EPA Registration Number	10. Amount of Product Applied		11. Concentration	12. PHI	13. Weather Conditions, Apparatus License Plate No. and Name and License No. of Persons who applied pesticide. **Longest REI**
					Rate Per Acre	Total Product Applied			
__/__/20__									
Start:	[ ] Air								
Stop:	[ ] Ground								
	[ ]Chemigation								
__/__/20__									
Start:	[ ] Air								
Stop:	[ ] Ground								
	[ ]Chemigation								
__/__/20__									
Start:	[ ] Air								
Stop:	[ ] Ground								
	[ ]Chemigation								