

Pesticide and Fertilizer Management Division, Ph: 651-201-6696, Fx: 651-201-6117

# Approved Chemigation Application Record

Company Name: \_\_\_\_\_ Chemigation Permit #: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Phone #: \_\_\_\_\_

Address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Application Date	Label Name of Product Applied	EPA Product Registration #	Location <i>(For center Pivot, indicate all or partial (which area) depending on application . For Greenhouses indicate house and crop.)</i>

*This record may suffice for the records required by Minnesota's Chemigation Rule.*