Pesticide Application Record - Category H
Seed Treatments

This sample application record, provided by the Minnesota Department of Agriculture, gives applicators the requirements of the Pesticide Control Law.

Company Name ____________________________________________________________

Company Address ______________________________________________________________________________________

City __________________________________________ State ___________________________ Zip ________________

Phone ___________________________ Fax (optional) ___________________________ Email (optional) ___________________________

Applicator

Name (print) ___________________________________________________________ License Number ________________

Name (print) ___________________________________________________________ License Number ________________

Customer

Name ________________________________________________________________

Address ________________________________________________________________________________________________

City __________________________________________ State ___________________________ Zip ________________

Phone ___________________________

Date of Application ___ / ___ / ___ Time of Application

Month Day Year

Started ___________ AM PM

Finished _________ AM PM

For seed box treatments:

Temperature ___________ Wind Speed ___________ Wind Direction ___________ Units Treated ___________

Describe Location of Application Site (such as GPS coordinates; township, range, section, quarter section; street name; or provide a map)

________________________________________________________________________________________________________________________________________________________

<table>
<thead>
<tr>
<th>Brand Name</th>
<th>EPA Reg. No.</th>
<th>Rate Used</th>
<th>Units Treated per Lot #</th>
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