Pesticide Application Record – Category L
Mosquito and Black Fly Control

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 __________________________

Type of Application: __________________________ Time of Application: __________________

Aerial ☐ Ground ☐

Date of Application __ __ / __ __ / ___ AM ☐ PM ☐

Started __________ AM ☐ PM ☐

Finished __________ AM ☐ PM ☐

Temperature __________ Wind Speed __________ Wind Direction __________ Units Treated __________

Describe Location of Application Site (such as street names, park; provide a map; or give other information that accurately describes the site.)

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<th>Brand Name</th>
<th>EPA Reg. No.</th>
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Map

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