

Pesticide Application Record - Category P

Vertebrate Pest 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 _____

Date of Application ____ / ____ / ____
Month Day Year

Time of Application

Started _____ AM PM

Finished _____ AM PM

Temperature _____ Wind Speed _____ Wind Direction _____

Units Treated (such as square feet, number of mounds, etc.) _____

Describe Location of Application Site

(such as GPS coordinates; township, range, section, quarter section; street name or provide a map)

Brand Name	EPA Reg. No.	Rate Used

