

Agricultural Pesticide Use Record-Keeping Form for Texas Commercial/Non-Commercial Applicators

Crop/Commodity Owner's Name

Supervi	sing Appl	licator's N	Name an	d	License Nur	nber	Person performing application				Location of Land/Application: county, city, community, distances and directions, etc.						
Date: Month/ Day/Year	Starting Time of Day	Wind Direction	Wind Velocity	Air Temp.	Product/Brand Name (Include formulation: 4EC, 15G, etc.)	EPA Registration Number	Crop, Commodity or Site	Target Pest	Area Treated (acres, sq. ft., etc.)	Specific Reentry Interval (REI)	Active Ingredient (AI)	Total Volume of Application per Unit (bushel, acre, etc.)	Rate of Product (Oz., Pt., Qt., Lbs.) per Unit	FAA Number	TDA Decal Number	Comments Other factors affecting the effectiveness of this application Herbicide Spray Permit Number, if applicable 	
03/04/99	2:15 pm	SE	4 mph	85°	DePesto 4L	111-233	Corn	Weeds	10 ac.	24 hrs.	Atrazine	25 gal/acre	1 qt./acre			Medium soil moisture	

*Each licensed applicator is responsible for assuring that any person working under the licensee's direct supervision is knowledgeable of the label requirements and rules and regulations governing the use of the particular pesticide being used by the individual.