

Pesticide Application Data Sheet

Application Date: _____

Location: _____

Target Pest or Weed: _____

Product Applied: _____

Active Ingredient: _____

Application Rate: _____

Total Amount of Product Applied: _____

Product Form: (Circle One) *Liquid* *Granular* *Other*

Application Time: _____ A.M. P.M.

Temperature: _____

Wind Velocity & Direction: _____

Weather Conditions: (Circle one) *Sunny* *Partly Cloudy* *Cloudy*

Operator Name: _____

Operator License Number: _____