Pesticide Application Records for Rutgers University

Facility Name: _____ **Year**_____

Facility Address: _____

Note: Print this form on legal size paper

Date & Time Completed	Crop of Application	Location of Application	Product Name (Brand/Trade) or by Reference	Active Ingredients or by Reference	EPA Registration Number/s or by Reference	Number of Units or Size of Area	Total Amount of Product & Water (Recipe)	Name of Applicator & License Number or by Reference	Restricted Entry Interval	
									Duration Hours	Expiration Date & Time (am/pm)