

HOW TO USE THE ATTACHED RECORDKEEPING FORM

All Pesticide Contractors in the State of Georgia are required to keep records of all pesticide applications, general use and restricted use alike, by the Georgia Pesticide Use and Application Act of 1976. This pesticide use record is provided to you as a way to help you keep up with your pesticide applications. It is not mandatory to keep your records on the attached sheet, as long as the following information is recorded:

<u>Requirement</u>	<u>What to record</u>
Date and time of application--	Date and time of day application occurs
Customer Name--	Name of person applied for
Location of application--	Address of area treated.
Target Site--	what was treated (turf, shrubs, beds, cotton, tobacco, etc.)
Pesticide used--	Name of Herbicide, Insecticide, Fungicide, etc. used
Application Rate--	Amount of pesticide applied per acre or per 1000 square foot
Total amount applied--	Total amount of Pesticide used, or record total # of square feet or acres treated
Target Pest--	Pest you are spraying for (insects, weeds, mites, worms, etc.)
Equipment used--	indicate what you used to make application, such as spreader, hand/backpack sprayer, power equipment
Applicator initials--	Record the initials of who actually made the application
Unexpected occurrence--	Record any unexpected weather conditions, equipment failures, or other unexpected occurrences that happen during pesticide applications

If it is necessary to dispose of any left over or excess pesticides, you must record names, concentrations, and quantities of all pesticides disposed of and how you disposed of them.

Records must be maintained for a two- year period and are subject to inspection by the Georgia Department of Agriculture.

Remember, this applies to **all** pesticides applied by a pesticide contractor; general and restricted use products alike.

If you have any questions, please contact:

Georgia Department of Agriculture
19 MLK Jr. Drive SW
Ag Inputs Section, Pesticide Program, Room 410
Atlanta, GA 30334
Phone # 404-656-4958

PESTICIDE USE RECORD

Company Name _____

Commercial Applicator's Name _____ License# _____

Date and Time of Application	Customer Name	Location of Application	Target site	Pesticide Used	Application Rate	Total Amount Applied	Target Pest	Equipment used	Applicator Initials
AM									
PM									
AM									
PM									
AM									
PM									
AM									
PM									
AM									
PM									
AM									
PM									
AM									
PM									
AM									
PM									

***If any unexpected occurrence (rain, wind, pesticide spill, etc.) happens during application, explain fully on back of this sheet.**