

PESTICIDE RECORD KEEPING
Required Information (Under PA 451) is Bolded

LOCATION AND INSPECTION INFORMATION

Location: _____

Date: _____

Pests Noted:

Conditions Conducive To Pest Infestation:

Pest Management Recommendations Made By The Applicator:

Structural or Habitat Modifications Undertaken:

APPLICATION INFORMATION

Name of Pest Control Firm (If Employed) and Emergency Phone Number:

Target Pest(s): _____ **# of Target Pests Found or Reported:** _____

Name of Applicator: _____ **Applicator Certification #** _____

Name of Pesticide(s) [Brand or product name]: _____

EPA Reg #(s): _____ **Active Ingredient(s):** _____

Concentration of Pesticide(s) Applied: _____

Quantity of Pesticide(s) Used: _____

Method and Rate of Application (where applicable): _____

Restricted Entry Interval: _____

Location Where Pesticide(s) Applied [Written description or map]:

Notes: