South Dakota Department of Agriculture
PESTICIDE APPLICATION RECORD

Business name: _____

Mailing Address: _____

Customer Name: _____ _____
(First) (Last)

Mailing Address: _____

_____
(City) (State) (Zip)

Legal Description / Location of Application Site: _____

Pests to be controlled: _____

Date of Application: _____ Time Started: _____ Time Finished: _____
(Month) (Day) (Year) AM / PM AM / PM

Chemicals Used				
Common Name	**Trade / Brand Name**	**Chemical Company Name Listed on Label**	**EPA #**	**Active Ingredient per Unit**

Total Dilution or Pounds Applied per Unit: _____

Field / Surrounding Area Map:

N↑

Weather at Start of Application:

Wind Direction: _____

Wind Velocity (mph): _____

Air Temperature: _____

Acres Treated: _____

Crop / Commodity Treated:
(Check Box or write in)

- ☐ Alfalfa
- ☐ Barley
- ☐ Corn
- ☐ Dry Edible Beans
- ☐ Fallow
- ☐ Flaxseed
- ☐ Hay
- ☐ Oats
- ☐ Pasture
- ☐ Proso Millet
- ☐ Right of Way
- ☐ Sorghum
- ☐ Soybeans
- ☐ Sunflower
- ☐ Wheat, Spring
- ☐ Wheat, Winter
- ☐ Prairie Dogs
- ☐ _____
- ☐ _____
- ☐ _____
- ☐ _____
- ☐ _____

Applicator Name: _____

Applicator Address: _____

_____
(City) (State) (Zip)

Applicator License Number: _____

03/24/2011