



Daily Chemical Application Record Form

Revised October 2018

O D F	O D A	U S D A	<p>This form outlines daily chemical application information an applicator must record to meet requirements of the Oregon Departments of Forestry (ODF)¹ and Agriculture (ODA)², and the U.S. Department of Agriculture (USDA)³. An applicator may use a different form if the required information is included. <i>The applicator must retain the ODA and ODF-required records for 3 years, and the USDA-required records for 2 years.</i></p>
			Landowner and Location
	✓		Name, address, and telephone of person or business who owns or controls the property:
✓	✓	✓	Legal Description of Application Area (Township/Range/Quarter-quarter section):
*			Notification # : _____ Unit # : _____
			Applicator
✓	✓	✓	Applicator(s) (Name(s) of Person(s) Applying Chemical, Including Supervisor if Trainees or Apprentice):
	✓	✓	Applicator License Numbers for persons applying chemical (Including Supervisor if Trainee or Apprentice):
✓			Applicator Contractor:
			Application Information
	✓		Supplier of Pesticide Product:
✓	✓	✓	Pesticide EPA Registration Number: _____ Manufacturer, Product Name, (Formulation*): _____
✓			Fertilizer Formulation:
✓	✓	✓	Number of Acres Treated with chemicals:
✓	✓		Chemical Product Application Rate (Per Acre):
		✓	Total Amount of Chemical Product Applied:
✓			Carrier Used: <input type="checkbox"/> Water <input type="checkbox"/> Other _____ Carrier Rate (Gal./Acre):
	✓		Identification of Application Equipment Used (Truck #, Sprayer #, Backpack #, Etc.): If Aerial, F.A.A. Aircraft Number:
*			Application Method: <input type="checkbox"/> Aerial <input type="checkbox"/> Ground (<input type="checkbox"/> Pressurized & Broadcast <input type="checkbox"/> Other _____)
	✓	✓	Crop or site of application (enter "forest" for forestry applications):
✓	✓	✓	Date of Application: Beginning Time: _____ Ending Time: _____

ODF Only: For Aerial Pesticide Applications Measure and Record Weather Information Hourly; For Ground-Based Pressurized Broadcast Pesticide Applications Measure and Record Weather Information at the Beginning and End of Each Day's Application:

Time:									
Air Temperature (°F)									
Relative Humidity (%)									
Wind Speed (mph)									
Direction wind coming from (e.g., N or NNW)									

Applicator Signature: _____

¹ Oregon Department of Forestry requirements (per OAR 629-620) for all chemical applicators.
² Oregon Department of Agriculture requirements (per OAR 634.146 for commercial and public pesticide applicators, commercial operators, pesticide consultants, and private applicators using restricted-use pesticides or power driven equipment.
³ U.S. Department of Agriculture requirements for private pesticide applicators using restricted use products.
 * Optional information for ODF