

# Pesticide Application Record Sheet

## PEST CONTROL TRADER AND OPERATOR DETAILS

TECHNICIAN NAME

LICENCE NUMBER

SUPERVISOR NAME (IF APPLICABLE)

LICENCE NUMBER

TRADING NAME

TELEPHONE

ADDRESS

SIGNATURE

DATE

## JOB DETAILS

DATE

START TIME

FINISH TIME

CLIENT NAME

TELEPHONE

ADDRESS

TREATED LOCATION ADDRESS (IF APPLICABLE)

## PEST(S) TREATED

SPIDERS  ANTS  COCKROACHES  MICE  RATS  TERMITES  FLEAS

BEES  WASPS  OTHER (PLEASE SPECIFY)

## SPECIFIC LOCATION(S) OF APPLICATION ON THE PROPERTY

## SPECIFIC PRECAUTIONS INCLUDING RE-ENTRY PERIOD

## PESTICIDE DETAILS

PRODUCT TRADE NAME

BATCH NUMBER

APPLICATION METHOD

QUANTITY APPLIED

RATE OF APPLICATION

## WEATHER CONDITIONS

AMBIENT TEMPERATURE (DEGREES)

WIND DIRECTION

WIND SPEED