

Pesticide Applicator Record Book

Purdue Pesticide Programs has developed 3 tools for Private Applicator Record Keeping PPP—152:

Version 1: Paper Book

Version 2: Fillable PDF

Version 3: Downloadable Spreadsheet

PPP - 152 9/1/2023

Developed by:

Abby Heidenreich, Ag & Natural Resources Extension Educator,
Purdue Extension - Gibson County
Fred Whitford, Director, Purdue Pesticide Programs

Purdue Extension is not responsible for the contents of this book. These sheets are intended to be a guide for record keeping and in no way indicate complete records that satisfy the requirements of the OISC. Complete and accurate records are the responsibility of the applicator.

Private Applicator Restricted Use Pesticide Record Sheet			
Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products			
Application Information			
Applicator Name:			
Permit #:			
Date of Application (MM/DD/YYYY):	Start Time:	End Time:	
Location (Farm Name/Field Name and/or GPS Coordinates):			
Area (# Acres, Description of Area Treated):			
EXAMPLE			
Crop/Plant:	Pest to be controlled:		
Pesticide Information			
Brand Name	Amount Used	Rate	EPA Registration #
** Optional Information ** (May Be Required By Some Pesticide Labels)			
General Weather Notes:		Temperature:	
Wind Speed:		Wind Direction (blowing from):	
Additional Information Required by Label (If Applicable):			
Notes:			
Adjuvant Information			
Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):	Start Time:	End Time:
-----------------------------------	-------------	-----------

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:	Pest To Be Controlled:
-------------	------------------------

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information ** (May Be Required By Some Pesticide Labels)

General Weather Notes:	Temperature:
Wind Speed:	Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):	Start Time:	End Time:
-----------------------------------	-------------	-----------

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:	Pest To Be Controlled:
-------------	------------------------

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information ** (May Be Required By Some Pesticide Labels)

General Weather Notes:	Temperature:
Wind Speed:	Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):	Start Time:	End Time:
-----------------------------------	-------------	-----------

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:	Pest To Be Controlled:
-------------	------------------------

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **
(May Be Required By Some Pesticide Labels)

General Weather Notes:	Temperature:
------------------------	--------------

Wind Speed:	Wind Direction (blowing from):
-------------	--------------------------------

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):	Start Time:	End Time:
-----------------------------------	-------------	-----------

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:	Pest To Be Controlled:
-------------	------------------------

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **
(May Be Required By Some Pesticide Labels)

General Weather Notes:	Temperature:
------------------------	--------------

Wind Speed:	Wind Direction (blowing from):
-------------	--------------------------------

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):	Start Time:	End Time:
-----------------------------------	-------------	-----------

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:	Pest To Be Controlled:
-------------	------------------------

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information ** (May Be Required By Some Pesticide Labels)

General Weather Notes:	Temperature:
Wind Speed:	Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):	Start Time:	End Time:
-----------------------------------	-------------	-----------

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:	Pest To Be Controlled:
-------------	------------------------

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information ** (May Be Required By Some Pesticide Labels)

General Weather Notes:	Temperature:
Wind Speed:	Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):	Start Time:	End Time:
-----------------------------------	-------------	-----------

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:	Pest To Be Controlled:
-------------	------------------------

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information ** (May Be Required By Some Pesticide Labels)

General Weather Notes:	Temperature:
Wind Speed:	Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):	Start Time:	End Time:
-----------------------------------	-------------	-----------

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:	Pest To Be Controlled:
-------------	------------------------

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information ** (May Be Required By Some Pesticide Labels)

General Weather Notes:	Temperature:
Wind Speed:	Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):	Start Time:	End Time:
-----------------------------------	-------------	-----------

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:	Pest To Be Controlled:
-------------	------------------------

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information ** (May Be Required By Some Pesticide Labels)

General Weather Notes:	Temperature:
Wind Speed:	Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):	Start Time:	End Time:
-----------------------------------	-------------	-----------

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:	Pest To Be Controlled:
-------------	------------------------

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information ** (May Be Required By Some Pesticide Labels)

General Weather Notes:	Temperature:
Wind Speed:	Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):	Start Time:	End Time:
-----------------------------------	-------------	-----------

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:	Pest To Be Controlled:
-------------	------------------------

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **
(May Be Required By Some Pesticide Labels)

General Weather Notes:	Temperature:
------------------------	--------------

Wind Speed:	Wind Direction (blowing from):
-------------	--------------------------------

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):	Start Time:	End Time:
-----------------------------------	-------------	-----------

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:	Pest To Be Controlled:
-------------	------------------------

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **
(May Be Required By Some Pesticide Labels)

General Weather Notes:	Temperature:
------------------------	--------------

Wind Speed:	Wind Direction (blowing from):
-------------	--------------------------------

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes

Private Applicator Restricted Use Pesticide Record Sheet

Only Private Applicators holding a permit from the Office of Indiana State Chemist can apply Restricted Use Products

Application Information

Applicator Name:

Permit #:

Date of Application (MM/DD/YYYY):

Start Time:

End Time:

Location (Farm Name/Field Name and/or GPS Coordinates):

Area (# Acres, Description of Area Treated):

Crop/Plant:

Pest To Be Controlled:

Pesticide Information

Brand Name	Amount Used	Rate	EPA Registration #

** Optional Information **

(May Be Required By Some Pesticide Labels)

General Weather Notes:

Temperature:

Wind Speed:

Wind Direction (blowing from):

Additional Information Required by Label (If Applicable):

Notes:

Adjuvant Information

Brand Name	Amount Used	Rate	Notes