Golf Course Pesticide Tracking Form

Date of Application				
Applicator Name				
License/Cert. Number				
	T ((0)			
Course Location (Area/Turf/Green)				
Weather Conditions				
Wind Speed/Direction				
Reason for Application				
Pesticide Name	EPA Reg. No.	Rate per Acre/Area	Total Amount Used	Application Method
Start Time				
End Time				
Re-entry Interval (hrs)				
Remarks/Notes				