PESTICIDE USE RECORD

FORM #8A

Producer/Farm Name: _____

Application Date and Time of Completion	Chemical Applied (Include PCP#)	Rate Applied	Weather Conditions	Crop and Stage of Growth	Target Pest(s)	Field Identification, Location, Size	Earliest Possible Re-entry Date (Pre-Harvest Interval)	Size of Treated Area	Initials of Applicator (Certification Numbner if Contractor)