

INVASIVE PLANT CHEMICAL & MECHANICAL TREATMENT RECORD



| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|--|--|--------------------------|--|---------------------------|--|---|--|----------------------|--|-------------------|--|--------------------------|--|---------------------|--|-------------|--|-------------------|--|-------------|--|-------------------|--|-------------|--|-------------------|--|-------------------|--|------------------|--|------------------|--|----------------|--|------------------|--|-------------------|--|-----------------------------------|--|------------------------|--|----------------------------------|--|
| <input type="checkbox"/> DATA ENTERED INTO IAPP | | ENTERED BY | | | | PCP #s 2,4-D 14725; Banvel 18837; Escort 23005; Milestone 28137 Restore 28137/28271; Vanquish 26980; Grazon 26649 Roundup 13644; Tordon 22K 9005; Transline 24084 | | | | OTHER HERBICIDE | | REGISTRATION # | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| TREATMENT DATE YY/MM/DD | | AGENCY | | EMPLOYER | | CERTIFIED APPLICATORS | | CERT. NUMBER | | OTHER APPLICATORS | | CERT. NUMBER | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| RANGE UNIT | | PASTURE | | PAPER FILE ID | | PMP NUMBER | | SUPERVISOR SIGNATURE | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| ACTIVITY | | New Site | | Sites ID OR Paper File ID | | UTM Zone | | Easting | | Northing | | Invasive Plant Not Found | | Time of Application | | Species 1 % | | Distribution Code | | Species 2 % | | Distribution Code | | Species 3 % | | Distribution Code | | Area Treated (ha) | | Temperature (°C) | | Windspeed (Km/h) | | Wind Direction | | Treatment Method | | Name of Herbicide | | Application Rate (L Herbicide/ha) | | Amount of Mix Used (L) | | Sprayer Delivery Rate (L Mix/ha) | |
| <input type="checkbox"/> CHEMICAL <input type="checkbox"/> MECHANICAL <input type="checkbox"/> SURVEY ONLY | | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | JURISDICTION | | LOCATION OR ROAD NAME/Km | | | | | | | | | | COMMENTS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> CHEMICAL <input type="checkbox"/> MECHANICAL <input type="checkbox"/> SURVEY ONLY | | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | JURISDICTION | | LOCATION OR ROAD NAME/Km | | | | | | | | | | COMMENTS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> CHEMICAL <input type="checkbox"/> MECHANICAL <input type="checkbox"/> SURVEY ONLY | | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| <input type="checkbox"/> CHEMICAL <input type="checkbox"/> MECHANICAL <input type="checkbox"/> SURVEY ONLY | | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | JURISDICTION | | LOCATION OR ROAD NAME/Km | | | | | | | | | | COMMENTS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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Mechanical Treatments Mandatory Fields: Date of Treatment Agency Jurisdiction Site ID OR UTM Zone, Easting & Northing Species 1 Treatment Method Area Treated
Chemical Treatments Mandatory Fields: All fields indicated in Mech. Treatments, PLUS: Certified Applicator and Number Application Time Temperature Windspeed Name of Herbicide Application Rate Amount of Mix Used

MAP

SKETCH MAP (INDICATE NORTH)

IMAGE DETAILS

| ID | DATE YY/MM/DD | PERSPECTIVE | REFERENCE NO. |
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COMMENTS