

# County of Santa Clara IPM ACTIVITIES AND PESTICIDE USE REPORTING

## Reference Number & Status

Reference No.  Date of Request  Status   
ApprovedBy  Name

## Department Contact Information

Name  Tel   
Fax  E Mail   
Exemption Required Under County IPM OrdinanceSection Code

## Site Information

Site Name  Site ID   
Street  Area Map   
City   
Zip Code  Location Details   
County

## Target Pest

Activity Level    
Pest Name  Additional Pests

Commodity/Site

Additional comments about target pest(s)

Identify the need for use of requested product

Describe good faith efforts made to find alternative to the pesticide



Identify or demonstrate that effective economic alternatives to the pesticide do not exist for the particular use

Describe plan for investigating alternatives to the pesticide during the exemption period

**Material Information**

		Application Method	<input type="text"/>
Proposed Treated Area	<input type="text"/>	Total Dilution (Spray Volume)	<input type="text"/>
Dilution Spray Volume	<input type="text"/>	Tank Loads	<input type="text"/>
Tank Size	<input type="text"/>	No. of Acres/ Tank Load	<input type="text"/>

**Selected Pesticide (s)**

Pesticide Label & MSDS	<input type="text"/>	Web URL:	<input type="text"/>
Product Name	<input type="text"/>		Active Ingredient(s) and Percentage
Cal EPA No.	<input type="text"/>		
Pesticide Use Type	<input type="text"/>	<input type="text"/>	
	<input type="text"/>	<input type="text"/>	Inert Ingredient(s) and Percentage
Pesticide Hazard Rating	<input type="text"/>		
Aquatic or Terrestrial Ectotoxicity	<input type="text"/>		
Rate of Application	<input type="text"/>	Per	<input type="text"/>
Product/Tank Load	<input type="text"/>	Product/Fraction tank	<input type="text"/>
Total Product Req	<input type="text"/>	Product Unit Cost	<input type="text"/>
	<input type="text"/>	Total Product Cost (\$)	<input type="text"/>

Additional Comments About Selected Pesticide



**Selected Pesticide (s)**

Pesticide Label & MSDS

Web URL:

Product Name

Cal EPA No.

Pesticide Use Type

<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>

Pesticide Hazard Rating

Aquatic or Terrestrial Ectotoxicity

Rate of Application

<input type="text"/>	<input type="text"/>	Per	<input type="text"/>
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Product/Tank Load

<input type="text"/>	<input type="text"/>
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Product/Fraction tank

<input type="text"/>	<input type="text"/>
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Product/gl spray

<input type="text"/>	<input type="text"/>
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Total Product Req

<input type="text"/>	<input type="text"/>
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Product Unit Cost

<input type="text"/>	<input type="text"/>
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Total Product Cost (\$)

Active Ingredient(s)  
and Percentage

Inert Ingredient(s)  
and Percentage

Additional Comments About  
Selected Pesticide

**Selected Pesticide (s)**

Pesticide Label & MSDS

Web URL:

Product Name

Cal EPA No.

Pesticide Use Type

<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>

Pesticide Hazard Rating

Aquatic or Terrestrial Ectotoxicity

Rate of Application

<input type="text"/>	<input type="text"/>	Per	<input type="text"/>
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Product/Tank Load

<input type="text"/>	<input type="text"/>
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Product/Fraction tank

<input type="text"/>	<input type="text"/>
----------------------	----------------------

Product/gl spray

<input type="text"/>	<input type="text"/>
----------------------	----------------------

Total Product Req

<input type="text"/>	<input type="text"/>
----------------------	----------------------

Product Unit Cost

<input type="text"/>	<input type="text"/>
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Total Product Cost (\$)

Active Ingredient(s)  
and Percentage

Inert Ingredient(s)  
and Percentage

Additional Comments About  
Selected Pesticide



**Application Schedule**

Record Entry Date	<input type="text"/>	Time	<input type="text"/>	Proposed Start Date	<input type="text"/>	Time	<input type="text"/>
Expiration Date	<input type="text"/>	Time	<input type="text"/>	Actual Start Date	<input type="text"/>	Time	<input type="text"/>
Estimated No. of Applications	<input type="text"/>			Actual Finish Date	<input type="text"/>	Time	<input type="text"/>

**Safety Information**

**Hazard or Restrictions**

Pesticide Notification Posting Required	<input type="text"/>	<input type="text"/>	
Re-Entry Time	<input type="text"/>		Other

Special Instructions about Application - from Label about pesticide mixing, handling and application techniques etc.

Special Instructions, Precautions, Warnings from Label about Environmental Protection (Drift, Buffer), Public Safety, Notice to Public etc.

Endangered Species of Concern	<input type="text"/>	ES Map Review Available	<input type="text"/>
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Endangered Species of Concern: Alameda whipsnake, Bay checkerspot butterfly, California clapper rail, California freshwater shrimp, California tiger salamander, Delta smelt, Salt Marsh harvest mouse, San Francisco garter snake, San Joaquin kit fox, Tidewater goby, Valley elderberry longhorn beetle, California Red-legged frog

**Applicator/Worker Safety Information**

Worker Safety (PPE and other) Required	<input type="text"/>
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Did you use breathing protection (air filtration or air supply apparatus) for this application?	<input type="text"/>
Did you use eye protection for this application?	<input type="text"/>
Did you use protective gloves for this application?	<input type="text"/>
Did you use protective clothing for this application?	<input type="text"/>
Did you use safety shoes for this application?	<input type="text"/>
Did you use head protection for this application?	<input type="text"/>
Did you comply with all requirements as recommended by Pest Control Advisor?	<input type="text"/>

What other Applicator / Worker Safety Information do you think is needed for this job?



**Environmental Information**

Distance from School Site	<input type="text"/>	<input type="text"/>	Wind Velocity	<input type="text"/>	<input type="text"/>
Distance from Structure	<input type="text"/>	<input type="text"/>	Weather	<input type="text"/>	
Distance from Water Body	<input type="text"/>	<input type="text"/>	Temperature	<input type="text"/>	
Distance from Ag. Land	<input type="text"/>	<input type="text"/>	Buffer Followed	<input type="text"/>	<input type="text"/>

**Pesticide Operator, Applicator Supervisor, PCA Information**

Operator	<input type="text"/>		License Number	<input type="text"/>	
Street	<input type="text"/>				
City	<input type="text"/>	Zip Code	<input type="text"/>	County	<input type="text"/>
Tel	<input type="text"/>		Fax	<input type="text"/>	
E Mail	<input type="text"/>				
Web URL	<input type="text"/>				

**Applicator(s)**

Applicator	<input type="text"/>	License Number	<input type="text"/>
Applicator	<input type="text"/>	License Number	<input type="text"/>
Applicator	<input type="text"/>	License Number	<input type="text"/>
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**Department Supervisor**

Supervisor 1	<input type="text"/>	License Number	<input type="text"/>
Supervisor 2	<input type="text"/>	License Number	<input type="text"/>

**Pest Control Advisor**

I certify that I have considered alternatives and mitigation measures that would substantially lessen any significant impact on the environment, and have adopted those found feasible.

PCA	<input type="text"/>	License No.	<input type="text"/>	Signature	<input type="text"/>	Date	<input type="text"/>
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