VT GC Daily PESTICIDE Records

Golf Course_____
Year_____

These records must be maintained at the Golf Course for (5) years, and made available to the Agency upon request.

Date & Time	**Site of Application(s)** (greens, fairways, etc. with hole #s)	**Pesticide Product Name**	**EPA Reg. #**	**Amount of Product Used (lbs. or Gal)**	**Active Ingredient(s)**	**Lbs. Active Ingredient Used**	**Pest Treated For**	**Weather at Time of Application**

Do not submit this form to the Agency, but instead use these records to compile your pesticde usage for your end-of-year report.