Pesticide Application List for WPS Compliance

For: _____ **Year:** _____

(farm unit, greenhouse location, building, department, etc.)

Application Date (MO/DA)	Application Time (start & end)	Location & Description (list crop/site) of Treated Area(s)	Brand or Product Name	Active Ingredient	EPA Reg. Number	REI Duration (Hrs.)	REI Expiration (MO/DA/ Time)

prepared by CALS (M.L. Cummings); v. 1/21/99 updated (A. Andersen) v. 7/11/2018