

NOTICE OF INTENT TO APPLY RESTRICTED MATERIALS

NURSERY

COUNTY NO	SECTION	TOWNSHIP	RANGE	BASE & MERIDIAN	APP METHOD	PERMITTEE/PROPERTY OPERATOR	APPLICATOR NAME AND ADDRESS
		<input type="checkbox"/> N <input type="checkbox"/> S	<input type="checkbox"/> E <input type="checkbox"/> W	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> H	<input type="checkbox"/> GROUND <input type="checkbox"/> AIR <input type="checkbox"/> FUME <input type="checkbox"/> OTHER		
OPERATOR ID/PERMIT NUMBER				SITE IDENTIFICATION NUMBER		TOTAL PLANTED ACRES/UNITS	
LOCATION						BLOCK ID (IF APPLICABLE)	

DATE/TIME APPLIED PROPOSED	ACTUAL	TOTAL ACRES/UNITS TREATED PROPOSED	ACTUAL	COMMODITY/SITE TREATED

CHEM NO.	MANUFACTURE/NAME OF PRODUCT APPLIED	EPA/CALIF. REGISTRATION NUMBER FROM LABEL	RATE	DILUTION	TARGET PEST

DAYS REENTRY	DAYS PREHARVEST	APPLIED/SUPERVISED BY		N	
ENVIRONMENTAL CHANGES/COMMENTS				W	E
SUBMITTED BY		DATE	TIME	PCA NAME	
RECEIVED BY		BOX NUMBER	DATE	<input type="checkbox"/> APPROVED <input type="checkbox"/> DENIED	S
					TREATMENT AREA
					ADJACENT CROPS, SCHOOLS, DWELLINGS, ETC.

(1) CAC Submit to AGRICULTURAL COMMISSIONER at least 24 hours prior to application