

FIELD FUMIGATION USE MONITORING INSPECTION

PR-ENF-106 (EST. 2/02)

DRAFT

FOR CAC USE

ACTION REFERENCE:

Investigation #: DPR/WHS/OTHER (Circle one)

INSPECTING COUNTY

Form with fields: FIRM / PERSON INSPECTED, LICENSE NUMBER, WIND VELOCITY, FIRM MAILING ADDRESS, TELEPHONE NUMBER, PERMIT/OPERATOR ID NUMBER, PROPERTY OPERATOR, FUMIGATION METHOD, COMMODITY/SITE, PROPERTY LOCATION, BUFFER ZONES, SITE ID NUMBER, ADJACENT ENVIRONMENT, METHOD OF APPLICATION, BUSINESS TYPE, SUPERVISOR, INTERVIEWED.

Table with 3 columns: HANDLER'S NAME / # INTERVIEWED, ACTIVITY, PERSONAL PROTECTIVE EQUIPMENT WORN

Table with 6 columns: PESTICIDE NAME / MANUFACTURER, LABEL REGISTRATION NUMBER, SIGNAL WORD, FORMULATION, RATE, DILUTION

Table with 4 columns: REQUIREMENTS, Section, COMPLIANCE (YES, NO, N/A), REQUIREMENTS (Continued), Section, COMPLIANCE (YES, NO, N/A)

Form with sections: COMPLIANCE ACTIONS, DECONTAMINATION FACILITY, VIOLATION NOTICE #

Remarks: Include a detailed description of noncompliances.

Form with fields: INSPECTOR, Signature, TIME AND DATE INSPECTED, INSPECTION ACKNOWLEDGED BY, Signature, DATE ACKNOWLEDGED