

SUSPECTED VOLATILIZATION INCIDENT REPORT

INCIDENT DETAILS	
<u>INCIDENT REPORTED BY:</u>	
Name:	
Address:	
Company:	
Tel.:	
Mobile:	
e-mail:	
Reporter:	Grower <input type="checkbox"/>
	Sprayer Operator <input type="checkbox"/>
	Adviser or Consultant to Grower <input type="checkbox"/>
	Distributor representative <input type="checkbox"/>
	Other <input type="checkbox"/> Specify
Date reported:	
Reported to:	Albaugh Europe <input type="checkbox"/>
	Distributor representative <input type="checkbox"/>
	Adviser or Consultant to Grower <input type="checkbox"/>
	Other <input type="checkbox"/> Specify
Means of reporting:	Telephone <input type="checkbox"/>
	e-mail <input type="checkbox"/>
	Other <input type="checkbox"/> Specify

NATURE OF INCIDENT	
Nature of symptoms: (Give a brief indication of the effects observed)	
Specify plants on which symptoms noted:	
Date symptoms first seen:	
Location:	
Notes: (State the possible source and cause of the incident)	

INVESTIGATION DETAILS

INVESTIGATED BY (Please indicate the investigator's details)

Name:	
Address:	
Company:	
Position:	
Tel.:	
Mobile:	
e-mail:	

INVESTIGATION REPORT

PRODUCT USER'S DETAILS

Name:			
Address:			
Company:			
Position:			
Tel.:			
Mobile:			
e-mail:			
Site:			
Crop	Potato	<input type="checkbox"/>	
	Oilseed rape	<input type="checkbox"/>	
	Other	<input type="checkbox"/>	Specify
Area treated:		ha	
Amount of product used on this crop area:			
Application water volume:			
Date treated:			
Weather conditions at application:	Temperature:		
	% Cloud cover:		
	Wind speed:		
	Rainfall within 7 days:		
	Soil moisture:		
Notes and Recommended further action:			

Albaugh Europe SARL

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Company registration number CH-660-1934004-6