



Herbicide Application Record Sheet

LANDOWNER NAME: _____

LANDOWNER ADDRESS: _____

APPLICATOR
NAME/COMPANY: _____

APPLICATOR
GA LICENSE # _____

DATE OF APPLICATION: _____

TIME OF
APPLICATION: _____

LOCATION OF APPLICATION
SITE: *(attach map)* _____

TARGET PEST SPECIES: _____

TOTAL ACRES SPRAYED: _____

DESCRIPTION OF SPRAYED
AREA: *(pine forest,
hardwood forest, ag. field,
pasture, etc.)* _____

Herbicide USED &
APPLICATION RATE: _____

SPRAY VOLUME: *(GPA)* _____

TYPE OF EQUIPMENT
USED: _____

WEATHER

WIND SPEED : *(MPH)* _____

WIND DIRECTION: _____

TEMPERATURE: *(*F)* _____

HUMIDITY: *(%)* _____

Soil Moisture: wet

moist

dry

UNEXPECTED
OCCURANCES & ACTIONS
TAKEN: *(spillage, exposure,
drift, etc.)*

NAMES, CONCENTRATIONS
& QUANTITIES OF
PESTICIDES DISPOSED &
MANNER OF DISPOSITION:

Prepared by: _____

Date _____