

**Pesticides - Field Application Record**

Sheet number \_\_\_\_\_  
 Grower name \_\_\_\_\_ Farm name \_\_\_\_\_  
 Field/block no \_\_\_\_\_ Crop/variety \_\_\_\_\_ Area \_\_\_\_\_ (ha) Sowing or planting date \_\_\_\_\_

Date and time applied	Justification/target for application	Pesticide applied		Field or part of field sprayed	Application details		Wind Direction and speed	Harvest interval	First permissible harvest date	Operator
		Product name	Active ingredient		Rate	Water volume				

Audited, checked and approved by:

(To be signed after harvest is completed)

Name \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_