



LOUISIANA DEPARTMENT OF AGRICULTURE & FORESTRY

MIKE STRAIN DVM, COMMISSIONER

Agricultural & Environmental Sciences, 5825 Florida Blvd, Suite 3003, Baton Rouge, LA 70806, (225) 925-3796, FAX (225) 925-3760

* 4106 *

COMMERCIAL PESTICIDE APPLICATOR RECORD KEEPING FORM

OWNER / OPERATOR (FIRM): _____ LICENSE NUMBER: _____ CERTIFIED APPLICATOR: _____

ADDRESS: _____ LDAF CARD NUMBER: _____

CUSTOMER		PESTICIDE APPLIED									APPLICATOR	
NAME	ADDRESS	BRAND NAME OF PRODUCT	EPA REG. NUMBER	RUP ¹	DATE OF APP.	CROP OR TYPE OF APP.	LOCATION OF APP. ²	SIZE OF AREA TREATED ³	RATE OF APP.	TOTAL AMT. APPLIED ⁴	NAME	LDAF CARD NUMBER (IF APPLIC.)

- 1. Check if Pesticide is a Restricted Use Pesticide.
- 2. Field number or other reference as to the location of the application.
- 3. Acres, square feet, minutes of spraying, etc.
- 4. Refers to total amount of pesticide product (concentrate) used.