Pest Control Recommendation 1. Operator of the Property 2. Recommendation Expiration Date Address City County 3. Location to be Treated 4. Commodity to be Treated 5. Acres or Units to be Treated 6. Method of Application: 7. Pest(s) to be Controlled Air Ground Fumigation Other 8. Name of Pesticide(s) Rate Per Acre or Unit Dilution Rate Volume Per Acre or Unit 9. Hazards and/or Restrictions: 10. Schedule, Time or Conditions [1. Highly toxic to bees 2. Toxic to birds, fish and wildlife 11. Surrounding Crop Hazards Do not apply during irrigation or when run-off is likely to occur ☐ 4. Do not apply near desirable plants 12. Proximity of Occupied Dwellings, People, Pets or Livestock D 5. Do not allow to drift onto humans, animals, desirable plants or property □ 6. Keep out of lakes, streams and ponds 7. Birds feeding on treated area may be killed 13. Non-Pesticide Pest Control, Warnings and Other Remarks 8. Do not apply when foliage is wet (dew, rain, etc.) ☐ 9. May cause allergic reaction to some people 10. This product is corrosive and reacts with certain materials (see label) □11. Closed system required □12. Restricted use pesticide (California and/or Federal) 14. Criteria Used for Determining Need for Pest Control Treatment: D Sweep Net Counts D Leaf or Fruit Counts 13. Hazardous area involved (see map and warnings) D Preventive D Field Observation D14. Other (see attachment) □ Pheromone or Other Trap □ Soil Sampling ☐ History Other 15. Crop and Site Restrictions: O 1. Worker reentry interval _____ days O 2. Do not use within ____ days of harvest/slaughter O 3. Posting required OYes ONo _____days [] 4. Do not irrigate for at least _____ days after application 0 5. Do not apply more than __ application(s) per season [2] 6. Do not feed treated foliage or straw to livestock 7. Plantback restrictions (see label) D 8. Other (see attachment) 16. I certify that alternatives and mitigation measures that would substantially lessen any significant adverse impact on the environment have been considered and, if feasible, adopted. W 5... Adviser Signature Date Adviser License Number Employer Employers Address

Explanation and Instructions For Completing the Written Recommendation

- 1. Include the name and address of the grower, agency or firm for whom the recommendation is written.
- 2. Include the date the recommendation expires.
- 3. Provide information on how to locate the property or site to be treated.
- 4. Indicate the commodity, crop or site to be treated.
- 5. Indicate the total acres or units to be treated.
- 6. Check the box adjacent to the method of application.
- 7. Identification of pest or pests to be controlled by recognized common name.
- 8. Name of pesticide (common name or trade name), dosage rate per acre or other units, dilution rate and volume per acre.
- 9. Check the box adjacent to the applicable hazard(s) and/or restriction(s).
- 10. Indicate the schedule, time or conditions for the application in relation to temperature, time of day, irrigation, etc. Also, include any label restrictions on use or disposition of crop or crop byproduct.
- 11. Indicate any surrounding crops that may be sensitive to the recommended treatment.
- 12. Identify any occupied dwellings, fieldworkers, pets or livestock in the proximity of the treatment area.
- 13. Indicate any non-pesticide substance, pest control method or device that will be used to control pest(s). Warning of the possibility of damages by the pesticide applicator that reasonable should have been known to exist at the time of the recommendation.
- 14. Check the box adjacent to the criteria used for determining need for pest control treatment.
- 15. Check the box adjacent to the applicable crop and site restrictions.
- 16. Signature of the licensed pest control adviser or person acting in the capacity of a pest control adviser in accordance with the licensing exemption under Section 12001 of the California Food and Agriculture Code, the date the recommendation was made, and if applicable the adviser's license number. Also, include the name and address of the adviser's employer.

Map -Sketch the property or site to be treated and any surrounding hazards that are known to exist.