Powerpoint presentation from the Tulare County Agricultural Commissioner 2016 Continuing Education Classes

This online presentation is for informational purposes only. It does NOT count towards continuing education hours.

Tulare County Agricultural Commissioner's Office Continuing Education 2016



As a courtesy to others, please silence or turn off all cell phones at this time.

Thank you.





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TODAYS AGENDA

> Introduction

- > Application Specific Information Display
- Closed Mixing System/PPE Regulations
- > Break
- > Notice of Intent and Use Reports
- > Present Continuing Education Certificates

Private Applicator Certification

#Last names starting with A-H expire in 2018
#Last names starting with I-Q expire in 2016
#Last names starting with R-Z expire in 2017

Renewing Certification Here are the "HOW TO'S"

₭ Minimum of 2 hours in laws and regulations required.

#Where can you obtain hours besides here?



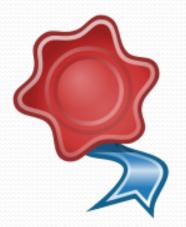


Certificate Renewal

#Renewal of PACs begins December 1, 2016.

₭ If you are short CE hours, after December 31, 2016, you will have to take the re-certification

test.





Renewing Certification Here are the "HOW TO'S"

Must renew your certification using continuing education hours by March 31st, 2017.



Renewing Certification Here are the "HOW TO'S"

Take the Re-certification test 80 question multiple choice test. 70% pass/fail requirement.



Restricted Materials Permit Renewal

Renewal of Restricted Materials Permits will begin on Thursday, December 1, 2016.

The permit will become effective on <u>January 1, 2017.</u>

Registration

#On December 1, 2016, the Agricultural Commissioner's Office will start registering:

- Pest control advisors
- Pest control businesses
- Farm labor contractors
- Pilots
- Maintenance gardeners
- Structural pest control businesses

Continuing Education Certificates

Don't forget to pick up your Continuing Education Certificate before you leave!



Legacy Pesticides

• Would you be interested in free disposal of your legacy (old and no longer registered) pesticides?



Tulare County Agricultural Commissioner/Sealer

Marilyn Kinoshita, Agricultural Commissioner Sealer of Weights and Measures Tom Tucker, Assistant Agricultural Commissioner Sealer of Weights and Measures

NAME:

MAILING ADDRESS:

PHONE NUMBER:_____

EMAIL:_____

PERMIT NUMBER:

ARE YOU A TULARE COUNTY GROWER? YES OR NO

WOULD YOU BE INTERESTED IN FREE DISPOSAL OF OUTDATED OR LEGACY PESTICIDES (OBSOLETE AGRICULTURAL PESTICIDES)? YES OR NO PLEASE LIST THE PESTICIDES/AMOUNT YOU WOULD LIKE TO DISPOSE OF:

ADDITIONAL INFORMATION OR COMMENTS:



Tulare County Agricultural Commissioner/Sealer

Marilyn Kinoshita, Agricultural Commissioner Sealer of Weights and Measures Tom Tucker, Assistant Agricultural Commissioner Sealer of Weights and Measures

LETTER OF AUTHORIZATION

| Property Operators | OPERATOR OF THE PROPERTY (PRINT NAME) |
|---|--|
| Information | ADDRESS |
| Letter of Authorization | CITY, STATE ZIP PHONE |
| will stay effective until the operator of the property revokes it in writing. | The authorized representative named below may represent me in obtaining a restricted material permit in Tulare County. I understand that this authorization does not relieve me of liability for violations of pesticide laws or regulations on my property. <u>This authorization</u> shall remain in effect until I revoke it in writing to the Agricultural Commissioner. |
| | Signature: Date: |
| | Title: Permit # |
| | Authorized Representative: |
| uthorized Representative's - | I am the Property Operator's [] Employee; [] Pest Control Business |
| nformation | I hereby certify that the information above is correct to the best of my knowledge. I understand that in the event of a violation of pesticide laws and regulations, I could be held liable, either separately or together, with the property operator. |
| | Signature: Phone: Phone: |
| | |

New Letter of Authorization

Authorized Rep Information



Thank you for your attention. Any questions?

Field Worker Safety Inspection

and

Application Specific Information Display (ASID)

Tulare County Agricultural Commissioner Continuing Education 2016

Goal of the Regulations

• Ensure employees and their employers are informed of the potential hazard of pesticides at the work site



| FIELD WORKER SAFETY INSPECTION REPORT | | | PAR | APLETE | PINSPECTION | | | | | | | | |
|---|-----------------|---|---------------------|--------|----------------------|---|---|------------------------------|------|--|---------------------|---------------------|------------|
| PR-ENF-103 (REV. 01/10) Page 1 of 1 | | | | OF | RIGINAL | INSP.# | - | | IN | SPECTING | i COI | JNTY | |
| FIRM / PERSON INSPECTED (Check one) | FL | .c 🗌 GI | ROWER | | THER | TELEPHONE | UMBER | | SITE | ID NUMBER | | | _ |
| FIRM MAILING ADDRESS | | | | | | PERMIT / OPE | RATOR ID NUMB | ER | сом | MODITY / SITE | | | |
| PROPERTY OPERATOR | | | | | | ADJACENT EN | WRONMENT | N | | | | | |
| PROPERTY LOCATION | | | | | | 1 | | | | | | | |
| SUPERVISOR | | | | TERVI | | 1 | | | | | | | _ |
| DATE OF APPLICATION RELEXPIRED | | | | RED | w | | TREATME | | | | | E | |
| APPROX. # OF FIELD WORKERS # O | F FIELD W | ORKERS I | | | _ | 1 | | | | | | | - |
| APPROXIMATE FIELD SIZE FIE | LD WORK | ERS ACTIV | ITY | | | | | 8 | | | | | |
| PESTICID | E NAME / I | MANUFAC | TURER | | | | LABEL REGIST | RATION NUM | IBER | SIGNAL WO | RD | RE | 1 |
| | | Fach | Fata I | | al Dec | tective Equipm | | | | | | | |
| N/A | | | - | rersor | iai Pro | lective Equipm | ent worn | | | | | | |
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400

FIELD WORKER SAFETY **INSPECTION**

(FARM LABOR CONTRACTOR)

STATE OF CALIFORNIA

Distribution: White - County; Canary - DPrc; r

(PROPERTY OPERATOR)

Page___

of

erson Inspected

Who is a field worker?

"Fieldworker" means any person who, for any kind of compensation, performs cultural activities in a field.







| SUPERVISOR | | | | | | | | | | | |
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| DATE OF APPLICATION | | | REI | EXPIRE |) W | | AREA | | | | Е |
| | | | | ES 🗆 N | 0 | | | | | | |
| APPROX. # OF FIELD WORKERS | # OF FIELD W | | | | | | | | | | _ |
| ATTROX # OF THEED WORKERS | # OF TIELD W | | | | | | | | | | |
| | | | | | | | | | | | |
| APPROXIMATE FIELD SIZE | FIELD WORK | ERS ACTIVITY | Y | | | | | | | | |
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| PES | STICIDE NAME / | MANUFACTU | RER | | | LABEL REGISTR | RATION NUMBER | SIGNAL WO | RD | RE | |
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| | | | | | | | | | | | |
| DERMAL . Labor Code 1695.(a)(8)Farm Labor Contractors | | | | | | | | | | | |
| DERMAL | . <u>La</u> | <u>bor Co</u> | <u>de</u> | <u>1695</u> | <u>.(a)</u> (8)Fa | rm Labo | r Contra | ictors | | | |
| Work Clothing | | | | | ister annu | | | | | | |
| Chemical Resistan | RAU | | | | | | | | | | |
| | | sistiati | | , RCE | | ally with | i the agric | cultural | | | |
| Chemical Resistan | - | | | <u> </u> | | - | • | | | ٦r | |
| Chemical Resistan Head Covering | com | missio | ner | oft | ne county | or count | ies in whi | | | or | |
| Chemical Resistan Head Covering Shoes and Socks | com | missio | ner | oft | ne county | or count | ies in whi | | | or | |
| Chemical Resistan Head Covering | com | missio | ner has | of t | ne county tracted wi | or count | ies in whi | | labo | | |
| Chemical Resistan Head Covering Shoes and Socks | com | missio | ner has | of t | ne county tracted wi | or count ith a grov | ies in whi ver. | | | MPLIAN | |
| Chemical Resistan Head Covering Shoes and Socks Other REQUIRE | com | nmissio tractor Section | ner has | of t | ne county tracted wi | or count ith a grov IREMENTS, (C | ies in whi ver. ^{ontinued)} | Section | labo | MPLIAN | ICE N/A |
| Chemical Resistan Head Covering Shoes and Socks Other REQUIRE | com | tractor Section | ner has | of t | ne county tracted wi | or count ith a grov IREMENTS, (C After Pesticide | ies in whi ver. ontinued) e Application | Section 6770 | | MPLIAN | |
| Chemical Resistan Head Covering Shoes and Socks Other REQUIRE | com | tractor Section 1695 LC 6618(a) | ner has | of t | ne county tracted wi REQU 9. Field Entry 10. Early Entry | or count th a grov IREMENTS, (C After Pesticide Requirements | ies in whi ver. ontinued) e Application | Section 6770 6771 | | MPLIAN | |
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| Chemical Resistan Head Covering Shoes and Socks Other <u>REQUIRE</u> 1. FLC Registered # 2. Notice of Application Within 3. Decontamination Facility 4. Hazard Communication A-9 | com con 1/4 Mile | tractor Section 1695 LC 6618(a) | ner has | of t | ne county tracted wi REQU 9. Field Entry 10. Early Entry 11. Posting Co | or count th a grov IREMENTS, (C After Pesticide Requirements | ies in white ver. ontinued) e Application | Section 6770 6771 | | MPLIAN | |
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| Chemical Resistan Head Covering Shoes and Socks Other <u>REQUIRE</u> 1. FLC Registered # 2. Notice of Application Within 3. Decontamination Facility 4. Hazard Communication A-9 | com con 1/4 Mile | section 1695 LC 6618(a) 6768 6761 | ner has | of t | ne county tracted with REQUINA 9. Field Entry 10. Early Entry 11. Posting Co 12. Greenhous | OF COUNT th a grov IREMENTS, (C After Pesticide Requirements ompliance se Ventilation C | ies in white ver. ontinued) e Application | Section 6770 6771 6776 6769 | | MPLIAN | |
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| SUPERVISOR DATE OF APPLICATION | | | | TERVIE YES [| NO | | | TREATMENT | | | | |
|---------------------------------------|-------------------------------|---------------|--------|-----------------|--------|----------------------|-------------------|--------------------|--|---------|---------------|-----|
| DATE OF APPLICATION | | | | ELEXPI YES [| | vv | | AREA | | | | L |
| APPROX. # OF FIELD WORKERS | # OF FIELD W | VORKERS INT | | | | _ | | | | | | — |
| APPROXIMATE FIELD SIZE | | | | | | _ | | | | | | |
| APPROXIMATE FIELD SIZE | FIELD WORKERS ACTIVITY | | | | | | | s | | | | |
| PEST | PESTICIDE NAME / MANUFACTURER | | | | | | LABEL REGISTR | RATION NUMBER | SIGNAL WO | RD | RE | - |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| | | 6618(a |) N | oti | ice | of Appli | cations | | | | | |
| DERMAL | | | | | | | | | b a b a b a b a b a b a b a b b a b b b b b b b b b b | | ~ f + | l. |
| Work Clothing | | - | | | | the prop | - | | | | | |
| Chemical Resistan | | schedi | ilec | l ar | nli | cation is | given to | employe | es covei | ed | 11 n 0 | ler |
| Chemical Resistan | | | | - | - | | U | <i>_</i> | | | | |
| Head Covering | | section | 167 | 700 | (W | hich incl | udes fiel | dworkers | s) and th | nei | ľ | |
| Shoes and Socks Other | | employ | yer | s w | ork | ing on th | e operat | or's prop | erty | | | |
| REQUN | _ | Section | | MPLIA | | REQUI | REMENTS, (C | ontinued) | Section | 1 | MPLIAN | |
| | | | YES | NO | N/A | | | , | | YES | NO | N/A |
| 1. FLC Registered # | | 1695 LC | | | | 9. Field Entry | | | 6770 | | | |
| 2. Notice of Application Within 1 | /4 Mile | 6618(a) | | | | 10. Early Entry | | 3 | 6771 | | | |
| 3. Decontamination Facility | | 6768 | | | | 11. Posting Co | • | | 6776 | | | |
| 4. Hazard Communication A-9 | | 6761 | | | | 12. Greenhous | | Criteria | 6769 | | | |
| 5. Emergency Medical Care Kno | owledge | 6766 | | | | 13. Labeling - F | PPE | | 12973 | | | |
| 6. Field Worker Training | | 6764 | | | | | | | | | | |
| 7. Application Specific Informati | | 6761.1 | | | | | | | | | | |
| 8. Field Work During Pesticide A | Application | 6762 | | | | TOTAL | | | TOTAL | | | |
| COMPLIANCE ACTIONS: | | | | | | COMPLIANCE | ACTIONS, (Con | tinued): | | | | |
| Cease and Desist Order 11897 / 131 | 102 | YES | NO | | | Follow-up Requi | | | YES | NO | | |
| Hazardous Area 6706 | | YES | NO | | | Correct Noncom | | | | | | |
| Remarks - Include a detailed descript | ion of noncon | npliances. Wh | en ado | litiona | l spac | e is required, conti | nue on Inspection | n Report / VN Supp | plement, PR-EN | IF-111. | | |



Field Workers

Pesticide Application

SUPERVISOR

| DATE OF APPLICATION | | |
|--|---------------|--------------|
| APPROX. # OF FIELD WORKERS | # OF FIELD W | ORKERS INTE |
| APPROXIMATE FIELD SIZE | FIELD WORK | ERS ACTIVITY |
| PES | TICIDE NAME / | MANUFACTU |
| | | |
| N/A | | Early Er |
| | | HANDS |
| | , | |
| Work Clothing Chemical Resistant Clothes | | Cloth/Lea |
| Chemical Resistant Boots | | |
| Head Covering | | |
| Shoes and Socks | | |
| Other | _ / | |
| REQUIREMENT | \checkmark | Section |
| 1. FLC Registered # | | 1695 LC |
| 2. Notice of Application Withi | | 6618(a) |
| 3. Decontamination Facility | | 6768 |
| 4. Hazard Communication A-9 | | 6761 |
| 5. Emergency Medical Care Kr | nowledge | 6766 |
| 6. Field Worker Training | | 6764 |
| 7. Application Specific Information | tion Display | 6761.1 |
| 8. Field Work During Pesticide | Application | 6762 |
| COMPLIANCE ACTIONS: | | |
| | 3102 | YES |
| Cease and Desist Order 11897 / 13 | | |
| Cease and Desist Order 11897 / 13 Hazardous Area 6706 | | YES |

INTERVIEWED

6768. Fieldworker Decontamination Facilities. located together at the decontamination site: at the start of the work day

- <u>at least one gallon</u> of water per employee, or
 three gallons of water per employee for
 employees engaged in early entry activities
- **Soap** (hand sanitizing gels and liquids or wet towelettes do not meet the requirement for soap); and
- Single use towels (wet towelettes do not meet the requirement for single-use towels).
- (for pesticide applicators must also have a pair of clean coveralls)
- Not more than 1/4 mile from the fieldworkers (or at the nearest point of vehicular access).
- Employees must be notified of the location of the decontamination site prior to working in a treated field.

What's missing?

1 -3 gallons per person



SUPERVISOR

| DATE OF APPLICATION | | | 4 |
|--|-----------------|------------------------------------|-----------|
| APPROX. # OF FIELD WORKERS | # OF FIELD WOF | RKERS INT | ERV |
| APPROXIMATE FIELD SIZE | FIELD WORKER | S ACTIVIT | Y |
| PEST | ICIDE NAME / MA | NUFACTU | IREF |
| | | | |
| | | | |
| N/A | | Early E | ntry |
| DERMAL | _ | HANDS | |
| Work Clothing Chemical Resistant Clothes Chemical Resistant Boots Head Covering Shoes and Socks Other | | Cloth/Le Chemica Other No | |
| REQUIREMENTS | | n | YE |
| 1. FLC Registered # | $\overline{}$ | 95 LC | |
| 2. Notice of Application Within | | 6618(a) | |
| 3. Decontamination Facility | \leftarrow | 6768 6761 | \square |
| 4. Hazard Communication A-9 5. Emergency Medical Care Kno | owledge | 6766 | \vdash |
| 6. Field Worker Training | omougo | 6764 | \vdash |
| 7. Application Specific Informati | on Display | 6761.1 | \square |
| 8. Field Work During Pesticide | Application | 6762 | |
| COMPLIANCE ACTIONS: | | | |
| Cease and Desist Order 11897 / 131 | 102 | YES |] NO |
| Hazardous Area 6706 | | YES | NO |
| Remarks - Include a detailed descript | ion of noncompl | iances. Wł | nen a |
| | | | |

6766. Emergency Medical Care.

- planned for in advance
- The employees, or their supervisor in the field informed of the name and location
- if facility is not reasonably accessible from thatwork location, the procedures to be followed toobtain emergency medical care.
- pesticide illness, or exposure employer shall ensure that the employee is taken to a physician immediately.
- The employer shall provide the following
 information to medical personnel treating an
 employee for a suspected pesticide exposure in
 the production of an agricultural commodity:
 Copies of the applicable Safety Data Sheet(s)
 and the product name(s), U.S. Environmental
 Protection Agency registration number(s) and
 active ingredient(s) for each pesticide product to
 which the person may have been exposed.
- The circumstances of application or use of the pesticide.
- The circumstances that could have resulted in exposure to the pesticide.

SUPERVISOR

| DATE OF APPLICATION | | | _ |
|---|----------------|--------------------------------------|-----------|
| APPROX. # OF FIELD WORKERS | # OF FIELD WO | ORKERS INT | 'ER' |
| APPROXIMATE FIELD SIZE | FIELD WORKE | RS ACTIVIT | Y |
| PEST | ICIDE NAME / N | MANUFACTU | RE |
| | | | |
| | | Early E | 10.4× |
| N/A DERMAL | | HANDS | |
| Work Clothing Chemical Resistant Clothes Chemical Resistant Boots Head Covering Shoes and Socks Other | | Cloth/Le Chemica Other None | ath |
| REQUIREMENTS | | | H |
| 1. FLC Registered # | | LC د | Π |
| 2. Notice of Application Within | 1/4 1 | 618(a) | |
| 3. Decontamination Facility | × 4 | 6768 | |
| 4. Hazard Communication A- | | 6761 | |
| 5. Emergency Medical Care K | 2 | 6766 | |
| 6. Field Worker Training | | 6764 | \square |
| 7. Application Specific Informati 8. Field Work During Pesticide | on Display | 6761.1 6762 | \square |
| COMPLIANCE ACTIONS: | Application | 0702 | Ц |
| | 100 | YES | |
| Cease and Desist Order 11897 / 13 Hazardous Area 6706 | | YES | |
| Remarks - Include a detailed descript | tion of noncom | | |
| | | | _ |

INTERVIEWED

6764. Fieldworker Training.

employee trained within the last <u>12 months</u>, <u>before</u> beginning work in the treated field.

- An employee who holds a valid personal pesticide license or certificate is considered to be trained for the purposes of this section.
- information shall be presented in a manner the employee can understand, orally from written materials or audio visually, using nontechnical terms in a location reasonably free from distraction. The trainer shall be present throughout the training and shall respond to employee questions.
- The person conducting the training shall be qualified (PAC, QAL, QAC, PCA, Pilot, etc.)
- The training shall include the following information:

FIELDWORKER SAFETY TRAINING RECORD

NAME OF EMPLOYER: _____ DATE: _____

NAME OF TRAINER:

Trainer's qualification:

| Symptoms of poisoning: Pinpoint pupils, nausea shortness of breath, dizziness, blurred vision. Ways poisoning or injury can occur. | Location of pesticide safety information series (PSIS) Material safety data sheets (MSDS), pesticide use reports, safety posters, and restricted entry intervals. |
|---|---|
| Wash hands and arms with soap and water: Before eating drinking, smoking, or going to the bathroom. Emergency Eye flushing techniques. | The need for immediate decontamination of skin and eyes when exposure occurs. |
| Wash completely at the end of the workday and change into clean clothing. | Employee's rights: against discharge, discrimination, rights to receive information. |
| Wear clean work clothing daily. Be aware of pesticides residues on clothing. | Routes through which pesticides enter the body. |
| Understanding the immediate and long-term hazards involved in handling pesticides. Known or suspected chronic and acute effects. | Prevention, recognition, and first aid treatment of heat related illness. |
| Emergency medical information: Name, address, phone number of clinic, physician, or hospital emergency room and where information is located. | Restricted entry intervals and posting. Do not enter treated areas. |
| Never take home pesticide containers used at work. | |

Print Your Name

Sign Your Name

1. _____ 2._____

3._____

Λ

| REQUIREMENTS Section Yes NO NA REQUIREMENTS, (Continued) Section Yes 1. FLC Registered # 1695 LC 9. Field Entry After Pesticide Application 9'''O 9'''''''''''''''''''''''''''''''''''' | | | | | | 1 | 1 | | |
|---|---------------------------------------|-------------------|-------------------|-------------------|----------------|-------------------|---------------|-----------|--------|
| DATE OF APPLICATION RELEXPIRED W INCREAT APPROX. # OF FIELD WORKERS # OF FIELD WORKERS INTERVIEWED APPROXIMATE FIELD SIZE FIELD WORKERS ACTIVITY S APPROXIMATE FIELD SIZE FIELD WORKERS ACTIVITY S S PESTICIDE NAME / MANUFACTURER LABEL REGISTRATION NUMBER SIGNAL WORD DERMAL HANDS Early Entry Personal Protective Equipment Worn DERMAL HANDS EYES INHALATION Chemical Resistant Clothes Chemical Resistant Gloves Safety Glasses JOUST Mask 1/2 Face Respirat Chemical Resistant Boots Other None SCBA None SCBA None Shees and Socks Compliance Faceshield None SCBA None 1. FLC Registered # 1695 LC NO NA REQUIREMENTS Section COMPLIANCE YES None Socenamination A-9 6771 State of 776 4.4.4.4.4.4.4.4.4.4.4.4.4.4.4.4.4.4.4. | RVISOR | | INTERVIEWE | D | | | | | |
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| APPROXIMATE FIELD SIZE FIELD WORKERS ACTIVITY s PESTICIDE NAME / MANUFACTURER LABEL REGISTRATION NUMBER SIGNAL WORD Image: Signal Work Signal Work Signal Work Image: Signal Work Early Entry Personal Protective Equipment Worn Image: Signal Work Image: DERMAL HANDS EYES INHALATION Image: DERMAL HANDS EYES Image: Signal Work Chemical Resistant Clothes Coth/Leather Gloves Safety Glasses Dust Mask Chemical Resistant Boots Cother Dust Mask IVE Faceshield Dust Mask Shoes and Socks Other None SCBA None None Image: Shoes and Socks Section COMPLIANCE 9. Field Entry After Pesticide Application 10. Early Entry Requirements 6771 3. Decontamination Facility 6768 11. Posting Compliance 6776 6776 4. Hazard Communication A-9 6761 12. Greenhouse Ventilation Criteria 6769 6766 13. Labeling - PPE 12973 6. Field Worker Training 6766 13. Labeling - PPE 12973 6. Field Worker Training 6761 12. ComPLIANCE ACTIONS. (Continued): | | | YES N | C | | | | | |
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| PESTICIDE NAME / MANUFACTURER LABEL REGISTRATION NUMBER SIGNAL WORD Image: Construct of the second seco | XOXIMATE FIELD SIZE FIE | D WORKERS ACTIVIT | Y | | | | | | |
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| Shoes and Socks Other | | | | H | | | | espirator | |
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| 2. Notice of Application Within 1/4 Mile 6618(a) 10. Early Entry Requirements 6771 3. Decontamination Facility 6768 11. Posting Compliance 6776 4. Hazard Communication A-9 6761 12. Greenhouse Ventilation Criteria 6769 5. Emergency Medical Care Knowledge 6766 13. Labeling - PPE 12973 6. Field Worker Training 6761 9 10. Early Entry Requirements 10. Early Entry Requirements 7. Application Specific Information Display 6761 12. Greenhouse Ventilation Criteria 6769 8. Field Work During Pesticide Application 0762 TOTAL TOTAL COMPLIANCE ACTIONS: COMPLIANCE ACTIONS, (Continued): YES NO Cease and Desist Order 11897 / 13102 YES NO Correct Noncompliances By: | LC Registered # | 1695 LC | | | After Pesticid | e Application | AP-O | | |
| 3. Decontamination Facility 6768 11. Posting Compliance 6776 4. Hazard Communication A-9 6761 12. Greenhouse Ventilation Criteria 6769 5. Emergency Medical Care Knowledge 6766 13. Labeling - PPE 12973 6. Field Worker Training 6761 10. Labeling - PPE 12973 7. Application Specific Information Display 6762 TOTAL TOTAL COMPLIANCE ACTIONS: COMPLIANCE ACTIONS. (Continued): Cease and Desist Order 11897 / 13102 YES NO Follow-up Required YES NO Hazardous Area 6706 YES NO Correct Noncompliances By: YES NO | | | | | | | | | |
| 4. Hazard Communication A-9 6761 12. Greenhouse Ventilation Criteria 6769 5. Emergency Medical Care Knowledge 6766 13. Labeling - PPE 12973 6. Field Worker Training 676 13. Labeling - PPE 12973 7. Application Specific Information Display 6762 TOTAL TOTAL 8. Field Work During Pesticide Application 6762 TOTAL TOTAL COMPLIANCE ACTIONS: COMPLIANCE ACTIONS, (Continued): Cease and Desist Order 11897 / 13102 YES NO Follow-up Required YES NO Hazardous Area 6706 YES NO Correct Noncompliances By: State State | | | | | | | 6776 | | |
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| 6. Field Worker Training 676 Image: Constraint of the second | | | | | | Jinena | | | |
| 7. Application Specific Information Display 761.1 TOTAL 8. Field Work During Pesticide Application 762 TOTAL TOTAL COMPLIANCE ACTIONS: COMPLIANCE ACTIONS: Cease and Desist Order 11897 / 13102 YES NO Hazardous Area 6706 YES NO Correct Noncompliances By: | | | | | ··· - | | | | |
| 8. Field Work During Pesticide Application 0762 TOTAL TOTAL COMPLIANCE ACTIONS: COMPLIANCE ACTIONS, (Continued): Cease and Desist Order 11897 / 13102 YES NO Follow-up Required YES NO Hazardous Area 6706 YES NO Correct Noncompliances By: VES NO | | | | | | | | | |
| COMPLIANCE ACTIONS: COMPLIANCE ACTIONS, (Continued): Cease and Desist Order 11897 / 13102 YES NO Follow-up Required YES NO Hazardous Area 6706 YES NO Correct Noncompliances By: YES YES | | | | TOTAL | | | TOTAL | | |
| Cease and Desist Order 11897 / 13102 YES NO Follow-up Required YES NO Hazardous Area 6706 YES NO Correct Noncompliances By: YES NO | . | I | | | ACTIONS. (Con | tinued): | | | |
| Hazardous Area 6706 YES NO Correct Noncompliances By: | se and Desist Order 11897 / 13102 | YES [| NO | | , | | YES | NO | |
| | | | | | | | | | |
| Remarks - Include a detailed description of noncompliances. When additional space is required, continue on Inspection Report / VN Supplement, PR-ENF-111. | | | hen additional sp | | | n Report / VN Sup | plement_PR-FN | F-111 | |



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|---|-------------|---------|--------------|-------------|---------------------------------|-----------------|---------------|--------------|----------|---------|
| SUPERVISOR | | INT | ERVIEV | VED | | | | | | |
| | | | YES | NO | | | TREATMENT | | | |
| DATE OF APPLICATION | | REI | EXPIR | ED | w | | AREA | | | E |
| | | | /ES | NO | | | | | | |
| APPROX. # OF FIELD WORKERS # OF FIELD V | VORKERS INT | ERVIEV | VED | | -1 | | | | | |
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| APPROXIMATE FIELD SIZE FIELD WORK | ERS ACTIVIT | Y | | | - | | | | | |
| | | | | | | | s | | | |
| PESTICIDE NAME | MANUFACTU | RER | | | | LABEL REGIST | RATION NUMBER | SIGNAL WO | RD | REI |
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| | | | | | | | | | | |
| N/A | Early E | ntry Pe | ersona | Prote | ective Equipme | ent Worn | | | | |
| DERMAL | HANDS | | | | | EYES | | INHALATI | ON | |
| Work Clothing | Cloth/Lea | ather G | Bloves | | | Safety Glasses | Г | Dust Mask | | |
| Chemical Resistant Clothes | Chemica | l Resis | stant Gl | oves | | Goggles | | 1/2 Face R | | |
| Chemical Resistant Boots | Other | | | | | Faceshield | | Full Face R | espirato | r |
| Head Covering Shoes and Socks | None | | | | | None | | SCBA None | | |
| Other | | | | | | | L | | | |
| | 1 | 00 | /PLIAN | | | | | | COM | PLIANCE |
| REQUIREMENTS | Section | | NO I | | REQUI | REMENTS, (C | ontinued) | Section | YES | |
| 1. FLC Registered # | 1695 LC | TLS | | | 9 Field Entry | After Pesticide | Application | 6770 | | |
| 2. Notice of Application Within 1/4 Mile | 6618(a) | | | | | Requirements | | 6771 | | |
| 3. Decontamination Facility | 6768 | | | | 1. Posting Co | | , | 515 | | |
| 4. Hazard Communication A-9 | 6761 | | | | - | e Ventilation C | ritorio | .769 | | |
| 5. Emergency Medical Care Knowledge | 6766 | | | | 2. Greennous 3. Labeling - F | | Interna | 2973 | | |
| 6. Field Worker Training | 6764 | | | | 5. Labelling - r | | | 2913 | | |
| 7. Application Specific Information Display | 6761.1 | | | _ | | | | | + | |
| 8. Field Work During Pesticide Application | 6762 | | | - _ | OTAL | | | TOTAL | | |
| COMPLIANCE ACTIONS: | 0102 | | | | | ACTIONS, (Con | inued) | TOTAL | | |
| | YES | NO | | | | | linueu). | | | |
| Cease and Desist Order 11897 / 13102 Hazardous Area 6706 | | NO | | | Follow-up Requi | | | YES | NO | |
| Remarks - Include a detailed description of noncor | | | lála v - l - | | | | D | lament DD C | 15 444 | |
| | | | | | | | | | | |

| | | | | | | _ | | | |
|---|---------------|-----|-------|-----|--|-----------------------------|---------|---------|-----|
| Chemical Resistant Boots Head Covering Shoes and Socks Other | Other None | | | | Faceshield None | Full Face R SCBA None | espirat | or | |
| REQUIREMENTS | Section | CO | MPLIA | NCE | REQUIREMENTS, (Continued) | Section | CON | /IPLIAN | NCE |
| REGOIREMENTS | Section | YES | NO | N/A | A | Section | YES | NO | N/A |
| 1. FLC Registered # | 1695 LC | | | | 9. Field Entry After Pesticide Application | 6770 | | | |
| 2. Notice of Application Within 1/4 Mile | 6618(a) | | | | 10. Early Entry Requirements | 6771 | | | |
| 3. Decontamination Facility | 6768 | | | | 11. Posting Compliance | 6776 | | | |
| 4. Hazard Communication A-9 | 6761 | | | | 12. Greenhouse Ventilation Criteria | 6769 | | | |
| 5. Emergency Medical Care Knowledge | 6766 | | | | 13. Labeling - PPE | 12973 | | | |
| 6. Field Worker Training | 6764 | | | | · · · · · | | | | |
| 7. Application Specific Information Display | 6761.1 | | | | | | | | |
| 8. Field Work During Pesticide Application | | | | | TOTAL | TOTAL | | | |
| COMPLIANCE ACTIONS: | | | | | COMPLIANCE ACTIONS, (Continued): | 1 | | | |
| Cease and Desist Order 11897 / 13102 | YES | NO | | | Follow-up Required | YES | NO | | |
| Hazardous Area 6706 | YES | NO | | | Correct Noncompliances By: | | | | |

Remarks - Include a detailed description of noncompliances. When additional space is required, continue on Inspection Report / VN Supplement, PR-ENF-111.

FIELD WORKER SAFETY INSPECTION

| INSPECTOR (Print Name) | Signature | TIME AND DATE INSPECTED |
|---|---------------------|-------------------------|
| INSPECTION ACKNOWLEDGED BY (Print Name) | Signature | DATE ACKNOWLEDGED |
| | | |
| (FARM LABOR CONTRACTOR) | (PROPERTY OPERATOR) | |

Distribution: White - County; Canary - DPR; Pink - Inspector; Goldenrod - Firm / Person Inspected

Title 3. California Code of Regulations (3 CCR) Division 6. Pesticides and Pest Control Operations

3 CCR 6761: Hazard Communication for Fieldworkers

3 CCR 6761.1: Application-Specific Information for Fieldworkers



CALIFORNIA ENVIRONMENTAL PROTECTION AGENCY

Pesticide Safety Rules For Farmworkers

The pesticide label, your training, and this leaflet, tell you about pesticide dangers at work. Your employer must know and help you learn about the pesticides used where you work, and how to protect yourself. Pesticides are chemicals that are used to control unwanted insects, weeds, and plant diseases.

EMPLOYERS: This is the hazard communication leaflet for fieldworkers. Fill in the blank lines in this leaflet and display this handout where employees work in treated fields.

FERTILIZERS ARE NOT PESTICIDES.

What training do I need?

You must be trained before working in fields where pesticides have been used recently. You must be trained every five years after that.

What does my training cover? You must be told about:

1. Health effects

- How pesticides can injure you or make you sick.
- · How you may feel or look if you get pesticides in or on you.
- Ways pesticides can enter your body.

2. Pesticide safety

- · The places at your work where you might get pesticides in or on you.
- · First aid information and where to get emergency medical care.
- Job safety information.







What do I need to know if I have to go into a field during the REI? Your employer must tell you:

- 1. The name of the pesticide sprayed and how long the REI is.
- 2. What special protective clothes or equipment (PPE) you must wear.
- 3. Ways the pesticide can make you sick.
- 4. How you may feel or look if you get pesticides in or on you.
- 5. What emergency first aid steps to take if a pesticide makes you sick.
- How to keep from getting sick from being too hot while using any PPE
- How you may feel or look if you get sick from being too hot and what first aid steps to take.
- Why you need to wash after you leave the field where pesticides have been used.

Your employer must give you all the PPE you need to wear during the REI. They must give you soap, water, and towels for you to wash up with after you take off your PPE.

What should I do if I start feeling sick at work?

Pesticides can make you sick. Symptoms of pesticide poisoning can be the same as having the flu or other common illnesses. If you get a headache, dizziness, upset stomach, blurred vision, flu-like symptoms, a rash, or eye pain while working in the field, ask your employer to take you to the doctor. A pesticide might cause these symptoms. You can also get skin rashes from plants and insects in the field.

Your employer must plan for medical care before you start working where pesticides have been used. If you think that pesticides made you sick or hurt you at work, your employer must make sure that you are taken to the doctor immediately. Do not drive yourself to the doctor if you get sick at work. You do not have to pay for medical care if you get sick or hurt from pesticides at work.

Emergency medical care is available at

(Space for listing where care facilities are)

What are my rights?

You have the right to know about pesticides that have been used recently where you work. The farmer must keep records on:

· When and where the pesticide was applied.



Seguridad Con Pesticidas Para Los Trabajadores Agrícolas

Esta hoja informativa, la etiqueta del pesticida, y su entrenamiento,

le dicen sobre los peligros con pesticida en el trabajo. Su empleador

tiene que saber y ayudarle aprender acerca de los pesticidas usados

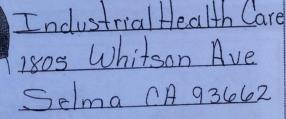
donde usted trabaja, y como protegerse usted mismo

¿QUÉ DEBO HACER SI ME EMPIEZO A SENTIR ENFERMO EN EL TRABAJO?

Los pesticidas pueden enfermarlo. Los síntomas de envenenamiento por pesticida pueden ser los mismos a los de una influenza u otra enfermedad en común. Si a usted le da un dolor de cabeza, mareo, dolor de estómago, visión borrosa, u otros síntomas parecido a la influenza, ronchas, o dolor de ojos mientras trabaja en el campo, pídale a su mayordomo que lo lleve al doctor. Un pesticida podría causar estos síntomas. Usted también puede sufrir ronchas debido a las plantas e insectos en el campo.

Su empleador tiene que hacer planes para el cuidado médico antes que usted empiece a trabajar donde se han usado pesticidas. Si usted piensa que los pesticidas lo enfermaron o lo lesionaron en el trabajo, el agricultor tiene que asegurarse que lo lleven al doctor inmediatamente. Si usted se enferma en el trabajo, no maneje usted al doctor. Usted no tiene que pagar por el cuidado médico si usted se enferma o daña con pesticidas en el trabajo.

EL CUIDADO MÉDICO DE EMERGENCIA SE ENCUENTRA EN



¿Cuáles son mis derechos?

- 1. Usted tiene el derecho de saber acerca de los pesticidas que se han usado recientemente, donde usted trabaja. El agricultor tiene que mantener documentos sobre
- · cuando y donde se aplicó el pesticida
- el intervalo de entrada restringida (REI, por su sigla en inglés = re-entry interval)

Si usted piensa que los pesticidas lo enfermaron o lo lesionaron en el trabajo, su empleador tiene que asegurarse que lo lieven al doctor inmediatamente.

No.

EMPLEADORES: Esta es la hoja informativa de comunicación de peligro para los trabajadores de

HS-1587s Revisado Septiembre 2004

FARMS - STRATHMORE RANCH

EMERGENCY- SIERRA VIEW DISTRICT HOSPITAL 465 W PUTMAN AVE, PORTERVILLE CA 93257 - (559) 784-8885

ENIEKGENUT MIEDI

CLINIC - VALLEY INDUSTRIAL - 755 E TERRACE AVE, TULARE CA 93274 - (559) 685-8800

FARMS - LINDSAY RANCH

EMERGENCY - SIERRA VIEW DISTRICT HOSPITAL 465 W PUTMAN AVE, PORTERVILLE CA 93257 - (559) 784-8885

CLINIC - VALLEY INDUSTRIAL - 755 E TERRACE AVE, TULARE CA 93274 - (559) 685-8800

ARMS - PIXLEY RANCH

EMERGENCY - 1401 GARCES HWY, DELANO CA 93215 - (661) 725-4800 CLINIC - VALLEY INDUSTRIAL - 755 E TERRACE AVE, TULARE CA 93274 - (559) 685-8800

FARMS - AVE 32 AND AVE 24 DELANO

EMERGENCY - 1401 GARCES HWY, DELANO CA 93215 - (661) 725-4800 CLINIC - VALLEY INDUSTRIAL - 755 E TERRACE AVE, TULARE CA 93274 - (559) 685-8800

FARMS - KIMBERLINA RANCH

EMERGENCY - 1401 GARCES HWY, DELANO CA 93215 - (661) 725-4800 CLINIC - VALLEY INDUSTRIAL - 755 E TERRACE AVE, TULARE CA 93274 - (559) 685-8800

- The restricted entry interval (REI).
- Name of the pesticide and active ingredient(s).
- The U. S. EPA registration number.

As part of your training, your employer must tell you where this information is kept. They must also let you see the records anytime you want without having to ask.

You can find information about recent pesticide use at (employers Farmer Smith this is the application-specific information): 123 Smith Street, Delano

See attached list

You have the right to report unsafe work conditions without being punished or fired. Neither the farmer nor your employer will be told who made the complaint. Your statements about the safety problems must be checked out right away.

Pesticides are only one kind of danger at your work. If you have a complaint about a pesticide safety problem, you should call your County Agricultural Commissioner. You can look up the Commissioner's number in the government pages of your local phone book, or by calling DPR's toll-free complaint information line, 1-87PestLine (1-877-378-5463). Other health and safety complaints (bathrooms, heat stress, drinking water, etc.) should be filed with the California Department of Industrial Relations Cal/OSHA office.

If you get sick or hurt BECAUSE OF YOUR JOB, you have the right to file for worker's compensation. Workers' compensation will pay for your medical bills, and sometimes, lost pay.

You have the right to look at Safety Data Sheets (SDS) and records for all pesticides used where you work. The SDS tells you about the pesticide and its dangers.

See attached list

Your employer must explain your rights to you. If you need more help understanding your rights, go to your local county agricultural commissioner's office, local legal aid, worker's rights office, your union or the Department of Pesticide Regulation (DPR)



White binder by back

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| Grower | Address | Contact | Cell # | Office # | Fax # |
|-----------------------|---|------------------------|--------------|--------------|------------------------------|
| A & A Ag Services | 45674 Road 128, Orange Cove, CA 93646 | Andrew Brown | 559/799-5155 | | 559/626-4297 |
| ABE-EL Produce | 42143 Road 120, Orosi, CA 93647 | Frank Abe | 559/280-1615 | 559/528-3030 | 559/528-6772 |
| Apkarian Family Farms | 8031 S. Crawford Ave | Brian or Linda Raphael | 559/287-1785 | 559/638-6588 | |
| Alves Brothers | 13339 Ave 256, Tulare, | Frank Alves | 559/805-9944 | | 559/798-4643 |
| Arves broundra | CA 93274 | Steve Alves | 559/805-9946 | | 559/798-4643 |
| | 30994 Road 92 . Visalia. | John Bianco | 559/280-5079 | | |
| Chuck Olsen Company | CA 93190 | Barbara Campos | | 559/651-5900 | 559/651-8350 |
| D Bar J Orchards | 9347 South Hills Valley Road, Orange Cove, CA 93646 | Justin Brown | 559/799-2063 | 559/626-4994 | 559/626-4267 |
| EMV Farms | 10132 S. Crawford Ave, Dinuba, CA 93618 | Horacio Guzman | 559/351-3012 | | |
| H&JR | 10132 S. Crawford Ave, Dinuba, CA 93618 | Horacio Guzman | 559/351-3012 | | |
| Jack Barsamian | 12612 Ave 392. Cutler. CA 93615 | Jack Barsamian | 559/623-5611 | 559/528-2575 | |
| McClarty Farms | 8067 S. Bethel Ave. Selma, CA 93662 | Drew Ketelsen | 559/318-0046 | 559/896-9305 | 559/896-1820 |
| Morning Mist Farms | 2511 W. Dovewood Lane, Fresno, CA 93711 | Dennis McFarland | 559/908-9868 | | |
| | 5725 E. Clemenceau, Selma, CA 93662 | Randy Sauza | 559/250-8118 | | |
| Randy Sauza Farms | THOSE E Elkom Ave. | Tim Raven | | | 559/896-1600 |
| Tim Raven | Selma, CA 93662 | | | 559/859-3149 | 559/896-3880 |
| Scott Raven Farming | 5700 E. Clarkson Ave, Selma, CA 93662 | Charlyse Raven | | | 559/896-3414 |
| Scott Raven . | | Emie Sauza | 559/250-9527 | 559/896-3411 | 559/896-3414 559/896-3414 |
| | | Ted Raven | 559/905-7344 | 559/896-3411 | 003/000 000 |
| | 4706 E. Conejo Ave, Selma, CA 93662 | Mari Mumeta | | | |

Grower MSDS Information

Missing specific location information

Información de SEGURIDAD **CON PESTICIDAS** A N.º 9

AGENCIA DE PROTECCIÓN DEL MEDIO AMBIENTE DE CALIFORNIA

Normas de Seguridad con Pesticidas Para los Trabajadores Agrícolas

La etiqueta del pesticida, su capacitación y este folleto le informan de los peligros de los pesticidas en el trabajo. Su empleador debe saber y ayudarle a aprender sobre los pesticidas que se usan donde usted trabaja y cómo protegerse. Los pesticidas son productos químicos que se usan para controlar plagas, como los insectos, maleza y enfermedades en las plantas.

EMPLEADORES: Este es el folleto que comunica sobre riesgos para los trabajadores agrícolas. Llene los espacios en blanco de este folleto y ponga a la vista esta hoja en donde los empleados trabajen en campos tratados.

LOS FERTILIZANTES NO SON PESTICIDAS.

¿Qué entrenamiento necesito?

A usted le deben de dar entrenamiento antes de trabajar en campos donde se hayan usado pesticidas recientemente. Lo deben entrenar cada cinco años después de eso.

¿Qué incluye en mi entrenamiento? Le deben indicar sobre

1. Efectos sobre la salud

- Cómo los pesticidas pueden dañarlo o causarle enfermedades.
- Cómo puede sentirse o verse si le caen pesticidas o entran a su cuerpo.
- Maneras en que los pesticidas pueden entrar a su cuerpo.



y use jabón después de trabajar en los campos para quitarse los restos de pesticidas

<u>A-9</u>



ਕੈਲੀਫ਼ੋਰਨੀਆ ਦੇ ਵਾਤਾਵਰਣ ਦੀ ਸੁਰੱਖਿਆ ਬਾਰੇ ਏਜੈਸੀ

A No. 9

ਫਾਰਮ ਵਰਕਰਾਂ ਲਈ ਕੀਟਨਾਸ਼ਕ ਸੁਰੱਖਿਆ ਨਿਯਮ

ਇਹ ਲੀਫ਼ਲੈਂਟ (ਪਰਚਾ), ਕੀਟਨਾਸ਼ਕ ਲੇਬਲ ਅਤੇ ਤੁਹਾਡੀ ਟਰੇਨਿੰਗ ਤੋਂ ਕੰਮ ਵਾਲੀ ਥਾਂ ਤੇ ਕੀਟਨਾਸ਼ਕਾਂ ਦੇ ਖ਼ਤਰਿਆਂ ਬਾਰੇ ਜਾਣਕਾਰੀ ਮਿਲਦੀ ਹੈ। ਤੁਹਾਡੇ ਮਾਲਿਕ ਨੂੰ ਪਤਾ ਹੋਣਾ ਚਾਹੀਦਾ ਹੈ ਅਤੇ ਤੁਹਾਨੂੰ ਉਨ੍ਹਾਂ ਕੀਟਨਾਸ਼ਕਾਂ ਬਾਰੇ ਜਾਣਕਾਰੀ ਦੇਣ ਵਿੱਚ ਮਦਦ ਕਰਨੀ ਚਾਹੀਦੀ ਹੈ ਜਿਨ੍ਹਾਂ ਨੂੰ ਤੁਸੀਂ ਕੰਮ ਵਾਲੀ ਜਗਹ ਤੇ ਵਰਟੋਗੇ ਅਤੇ ਤੁਸੀਂ ਆਪਣੇ ਆਪ ਨੂੰ ਸੁਰੱਖਿਅਤ ਕਿਵੇਂ ਰੱਖਣਾ ਹੈ। ਕੀਟਨਾਸ਼ਕ ਰਸਾਇਣ ਹਨ ਜਿਨ੍ਹਾਂ ਦਾ ਇਸਟੇਮਾਲ ਬੇਲੋੜੇ ਕੀੜਿਆਂ ਨੂੰ ਮਾਰਨ, ਨਦੀਣ ਜਰਾਸੀਮ ਅਤੇ ਪੌਦਿਆਂ ਦੀਆਂ ਬਿਮਾਰੀਆਂ ਕੰਟਰੋਲ ਕਰਨ ਲਈ ਕੀਤੀ ਜਾਂਦੀ ਹੈ।

ਮਾਲਿਕ: ਇਹ ਨੀਫ਼ਲੇਟ ਖੇਡ (ਪਰਚਾ) ਵਿੱਚ ਕੰਮ ਕਰਨ ਵਾਲਿਆਂ ਲਈ ਖ਼ਡਰੇ ਬਾਰੇ ਸੁਨੇਹਾ ਹੈ। ਇਸ ਨੀਫ਼ਲੇਟ (ਪਰਚੇ) ਵਿੱਚ ਖਾਲੀ ਛੱਡੀ ਹੋਈ ਥਾਂ ਨੂੰ ਭਰ ਦਿਉ ਅਤੇ ਛਿੜਕਾਅ ਕੀਤੇ ਉਸ ਖੇਡ ਵਿੱਚ ਨਾ ਦਿਉ ਜਿੱਥੇ ਵਰਕਰ ਕੰਮ ਕਰਦੇ ਹਨ।

ਖਾਦਾਂ, ਕੀਟਨਾਸ਼ਕ ਨਹੀਂ ਹਨ।

ਮੈਨੂੰ ਕਿਸ ਟਰੇਨਿੰਗ ਦੀ ਜ਼ਰੂਰਤ ਹੈ ?

ਜਿੱਥੇ ਬੀਟਨਾਸ਼ਬਾਂ ਦਾ ਹਾਲ ਵਿੱਚ ਹੀ ਇਸਤੋਮਾਲ ਬੀਤਾ ਗਿਆ ਹੈ, ਉਨ੍ਹਾਂ ਖੇਤਾਂ ਵਿੱਚ ਬੰਮ ਸ਼ੁਰੂ ਕਰਨ ਤੋਂ ਪਹਿਲਾਂ, ਤੁਹਾਨੂੰ ਟਰੇਨਿੰਗ ਮਿਲਣੀ ਚਾਹੀਦੀ ਹੈ, ਇਸਤੋਂ ਬਾਅਦ ਹਰ ਪੰਜ ਸਾਲ ਬਾਅਦ ਖ਼ੁਸ਼ ਟਰੇਨਿੰਗ ਦੇਣੀ ਚਾਹੀਦੀ ਹੈ।

ਮੇਰੀ ਟਰੇਨਿੰਗ ਤਹਿਤ ਹੋਰ ਕੀ ਦੱਸਿਆ ਜਾਂਦਾ ਹੈ ?

ਤੁਹਾਨੂੰ ਹੇਠ ਲਿਖੀਆਂ ਚੀਜ਼ਾਂ ਬਾਰੇ ਦੱਸਿਆ ਜਾਣਾ ਚਾਹੀਦਾ ਹੈ:

1. ਸਿਹਤ ਤੇ ਪ੍ਰਭਾਵ

- ਕੀਟਨਾਸ਼ਕ ਤੁਹਾਨੂੰ ਕਿਸ ਤਰ੍ਹਾਂ ਜਖ਼ਮੀ ਜਾਂ ਸ਼ੀਮਾਰ ਕਰ ਸਕਦੇ ਹਨ।
- ਜੇ ਬੇਟਿਨਸ਼ ਤੁਹਾਡੇ ਨਾਨ ਛੂਹ ਜਾਣ ਜਾਂ ਤੁਹਾਡੇ ਅੰਦਰ ਚਲੇ ਜਾਣ ਤਾਂ ਤੁਸੀਂ ਬਿਸ ਤਰ੍ਹਾਂ ਮਹਿਸੂਸ ਬਰਦੇ ਹੋ, ਜਾਂ ਦਿੱਸਦੇ ਹੋ।
- ਬਿਸ ਤਰ੍ਹਾਂ ਕੀਟਨਾਸ਼ਕ ਤੁਹਾਲੇ ਅੰਦਰ ਜਾ ਸਕਦੇ ਹਨ।

2. ਕੀਟਨਾਸ਼ਕ ਸੁਰੱਖਿਆ

- ਤਹਾਡੀ ਕੰਮ ਵਾਲੀ ਵਾਂ ਤੋਂ ਕੀਟਨਾਸ਼ਕ ਤਹਾਡੇ ਉਪਰ ਪੈ ਸਕਦੇ ਜਾਂ ਅੰਦਰ ਜਾ ਸਕਦੇ ਹਨ।
- ਮੁੱਢਲੀ ਡਾਬਟਗੇ ਸਹਾਇਤਾ (ਫਸਟ ਏਡ) ਵਾਰੇ ਜਾਣਬਾਗੇ ਅਤੇ ਐਮਰਜੈਸੇ ਮੈਡੀਬਲ ਬੱਅਰ ਬਿੱਥੋ ਲੈਣੀ ਹੈ।
- ਨੱਥਰੀ ਦੀ ਸੁਰੱਖਿਆ ਬਾਰੇ ਜਾਣਬਾਰੀ।





Hazard Communication for Field Workers (A-9) CCR Section 6761



Employer of Employees working in <u>treated fields:</u>

- A-9 displayed in central location, or work site
- with all info filled out

Operator of the Property shall maintain at central location:

- Pesticide Use Records
- Safety Data Sheet (SDS)
- ASID

"**Treated field**" means a field that has been treated with a pesticide or had a restricted entry interval or entry restricted period in effect within the last 30 days.

A treated field includes associated roads, paths, ditches, borders, and headlands, if the pesticide was also directed to those areas. A treated field does not include areas inadvertently contaminated by drift or over spray.

<u>Changes effective January 1, 2017!</u>

6761. Hazard Communication for Field workers.
(a) employer shall display a copy of a completed A-9 at the worksite <u>and</u> all permanent decontamination facilities <u>and</u> decontamination facilities servicing 11 or more fieldworkers.

(b) Any changes to the name, address, or telephone number of the facility providing emergency medical care must be updated on the A-9 within 24 hours of the change.

| SUPERVISOR | | | fervie Yes [| | | | | | | | _ |
|---|-------------|---------|-----------------|---------|------------------|------------------|-------------------|--------------|---------|-------|-----|
| DATE OF APPLICATION | | | | | — w | | TREATMENT AREA | | | | E |
| | | | YES [| | | | AND N | | | | |
| APPROX. # OF FIELD WORKERS # OF FIELD V | VORKERS INT | | | | | | | | | | |
| | | | | | | | | | | | |
| APPROXIMATE FIELD SIZE FIELD WORK | ERS ACTIVIT | Y | | | - | | | | | | |
| | | | | | | | s | | | | |
| PESTICIDE NAME / | MANUFACTU | RER | | | | LABEL REGIST | RATION NUMBER | SIGNAL WO | ORD | RE | El |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| N/A | Early E | ntry P | ersor | nal Pro | tective Equipm | ent Worn | | | | | |
| DERMAL | HANDS | | | | | EYES | | INHALAT | ION | | |
| Work Clothing | Cloth/Le | ather (| Gloves | 5 | | Safety Glasses | Г | Dust Mask | | | |
| Chemical Resistant Clothes | Chemica | al Resi | stant | Glove | ; – | Goggles | F | 1/2 Face R | | | |
| Chemical Resistant Boots | Other | | | | | Faceshield | | Full Face R | Respira | tor | |
| Head Covering Shoes and Socks | None | | | | | None | _ | SCBA None | | | |
| Other | | | | | | | L | None | | | |
| | | 00 | MPLIA | NCF | | | | | CO | MPLIA | NCF |
| REQUIREMENTS | Section | YES | | N/A | REQUI | REMENTS, (C | ontinued) | Section | YES | NO | N// |
| 1. FLC Registered # | 1695 LC | | | | 9. Field Entry | After Pesticide | e Application | 6770 | | | |
| 2. Notice of Application Within 1/4 Mile | 6618(a) | | | | 10. Early Entry | | | 6771 | | | |
| 3. Decontamination Facility | 6768 | | | | 11. Posting Co | mpliance | | 6776 | | | |
| 4. Hazard Communication A-9 | 6761 | | | | 12. Greenhous | se Ventilation C | Criteria | 6769 | | | |
| 5. Emergency Medical Care Knowledge | 6766 | | | | 13. Labeling - I | PPE | | 12973 | | | |
| 6. Field Worker Training | 6764 | | | | | | | | | | |
| 7. Application Specific Information Display | 6761.1 | | | | | | | | | | |
| 8. Field Work During Pesticide Application | 6762 | | | | TOTAL | | | TOTAL | | | |
| COMPLIANCE ACTIONS: | | | | | COMPLIANCE | 1 | tinued): | | _ | | |
| Cease and Desist Order 11897 / 13102 | YES | NO | | | Follow-up Requ | | | YES | NO | | |
| Hazardous Area 6706 | YES | NO | | | Correct Noncon | npliances By: | | | | | |

Application-Specific Information For <u>Field workers</u> <u>ASID</u>

CCR Section 6761.1

- * The operator of property ... shall <u>display</u>, at a central location, the following <u>application-specific information</u> while field workers are employed to work in treated fields on the operator's property:
 - <u>Crop or site treated</u> and identification of the treated area;
 - Date and time the application <u>started and ended;</u>
 - Restricted entry interval;
 - Product name, U.S. EPA registration number, and active ingredients; and
 - A copy of the Safety Data Sheet's for the applied pesticide(s)
 - Spray adjuvant product names and California registration number(s) if applicable

ASID For Field workers CCR Section 6761.1

- Displayed when the property operator receives notice of the completion of an application
- Before any fieldworkers are allowed to enter the treated field.
- Include all applications to any field
- Remain displayed until the area no longer meets the definition of a treated field or fieldworkers will no longer be on the operator's property.

ASID For Field workers CCR Section 6761.1

- Display at the worksite or at a central location where fieldworkers gather,
 - a <u>description of the location</u> of the ASID whenever their fieldworkers are working in a treated field.
 - description of the location must be <u>specific enough for</u> <u>fieldworkers to find and have unimpeded access</u> to the ASID.
 - The location description must be on or attached to the A-9
- <u>The information required by this section must be</u> <u>retained for two years.</u>





Application-Specific Information

• Summary:

- Central location
- When operator receives completion notice
- Before any workers allowed to enter a treated field
- Until not a treated field or
 - No fieldworkers on operator's property
- Unimpeded access don't have to ask anyone where it is
- The original or copies of documents otherwise required ... may be used to meet the requirements of this section, provided they contain the information required by this section.

When are the use reports due?

When does the Application Specific Information need to be displayed?

What information is missing?

Pesticide Use Report

8/10/2016 9:02 PM

Report Status: Accepted by DPR Submittal Status: Submitted to DPR

Operator ID/Permit Number Permittee/Permit Operator Document number 5455108 5400717 County No Township Range Meridian App Method/Fume Code Commercial Applicator (if any) Section 24S 54 16 25E M Ground Grower Applied Site Identification Number Planted Area - Units 01-HCRI 160 ACRES Location Block ID Pre-plant NA 24, 1/4 ER 128 application No Date/Time Applied Freated Area - Units Commodity Treated 75 ACRES 29141 GRAPE 7/30/2016 9:00 AM Days Re-entry Days Pre-harvest Applied/Supervised By GROWER APPLIED

| Chem # | Product | Label # | Total Product Used | Rate | Dilution |
|--------|--------------|--------------|--------------------|---------|----------|
| | ETHEPHON 2SL | 66222-151-AA | 11.72 Gallon | 1.25 PT | |

Product name is here, but missing the active ingredient

Page No. 1 of 5

- The crop or site treated **<**
- Identification of the treated 2. field
- The date(s) and time(s) and 3. date of the application started and ended
- 4. Restricted entry interval
- Product name(s), U.S. EPA 5. registration number(s), and active ingredient(s)
- 6. Spray adjuvant product name(s) and California registration number(s) if applicable.
- 7. A copy of the Safety Data Sheet(s) for the applied pesticide(s)

| | | | 1/25/16 d 9 | | 237 | Am | | | | Pa | ge No. |
|---------------------|------------|----------------|------------------|---|---------------------|---------------------------|---|--|----------------------|--------|--------|
| | JCT U | se Rec | ommen | in the second | | | and the second se | والمتحد والمتحد والتشاري والمتحد والمحاول والم | 7626 (Rec N | o. 353 | 7626 |
| | | | | 2016-09-26 | Date / Timin | g Expire Dat 2017-09-2 | | PCA & Lic | iense | | |
| visaila, C Phone | A 93290 | | | Applicator | | | | Grower & | Permit Number | | |
| | 5 | | | Gutter, CA | 99010 | / | | 5401091 P.o. Box Cutler, C. Phone: | | | |
| County County | ORAN | ammodity GE | Method Ground | Proposed 20 Acres | Treated 20 Acres | Tank Volut 500 Ga | ne | No. Tanks 20 | Spray Volu 500 Ga | ne | |
| Site ID / S | TR | Location | | an a | 10100 | Planted Area | Propo | sed Area | Treated Area | Row | Ban |
| 9-W50 |) 25E M | SA 400, 3 | /8 ER 128 G | WPA-RUNO | FF | 160 Acres | 20 A | cres/ | 20 Acres | | |

ALWAYS READ AND FOLLOW LABEL DIRECTIONS

In addition, adhere to all State and local regulations governing the use of these products ** The execution of this recommondation certifies that alternative and mitigation measures that would substantially lessen any significant adverse impact on the environment have been considered and, if feasible, adopted,

| | Process | Signal Word | Labeled Commodity | Pest | Rate | Per Full Tank | Mat. Req. |
|----|---|----------------|----------------------|---------------|-------------------|------------------|-----------|
| ,V | NOT MANA Vulcan (66222-233) (39.50% - Chlorpyriles) | Caution | Orange | Scale, Red | 1.5 Ga / A | 1.5 Ga | 30 Ga |
| | CMR NO FOAM B (1050775-50008) | Caution | Agricultural Area | INC. | 12.8 Floz / 100ga | 64 Floz | 10 Ga |
| | Pre-Harvest Interval : 35 Days | 1 | | | | Re-Entry In | terval : |

Restrictions: Avoid Drift -- Certified Applicator Required -- Notice of Intent Required -- Posting Required -- Toxic To Bers -- Toxic To Birds -- Toxic To Fish -- See Label Regarding Feeding/Grazing

Species Toxic To: Small Mammals; Fish; Birds; Bees; Aquatic Organisms; Aquatic Invertebrates

Criteria Used For Determining Recommendation: Field Observation -- Pest is Presen

Advisor Comments: Walters 400 - Blk 12 ONLY 1.5 MPH Tractor Speed

AL AND CONTENT CONTAINED IN THE AGRIAN DATABASE AND ON THIS DOCUMENT ARE FOR INFORMATION ONLY AND NOT A SUBSTITUTE FOR THE ACTUAL EPA AND/OR STATE APPROVED PRODUCT LABEL, USERS OF THIS DATABASE MUST READ OLLOW THE APPROVED PRODUCT LABEL AFFIXED TO THE PRODUCT CONTAINER AND/OR APPLICABLE SUPPLEMENTAL LABELING JSE OF THE PRODUCT. RECIPIENT OF THIS DOCUMENT MUST HAVE THE PROPER KNOWLEDGE AND/OR LICENSING TO USE THIS DOCUMENT. USE SHALL BE DEEMED ACCEPTANCE OF, AND USE IS ONLY AUTHORIZED BY AGRIAN TO USERS WHO AGREE TO BE BOUND BY. THE TERMS OF SERVICE PUBLISHED AT AGRIAN.COM.

I certify that the product recommendations contained in this document are consistent with my review and understanding of the product notices beginning on the following page and the product/s) label.

Signature

Date : _2016-09-26

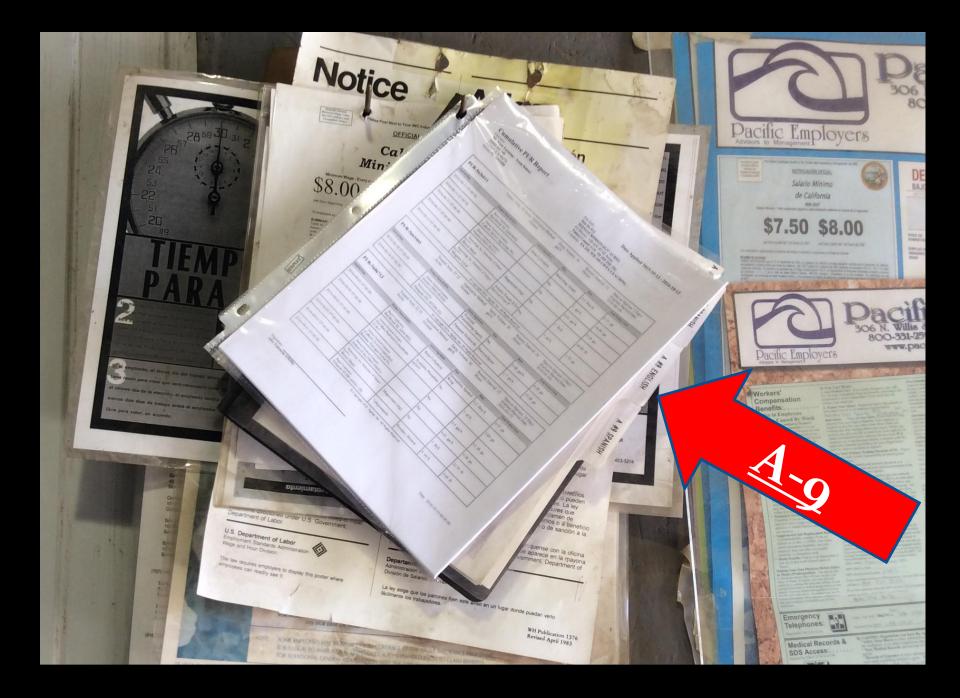
Copyright 2016, Agrian, Inc. All Rights Reserved

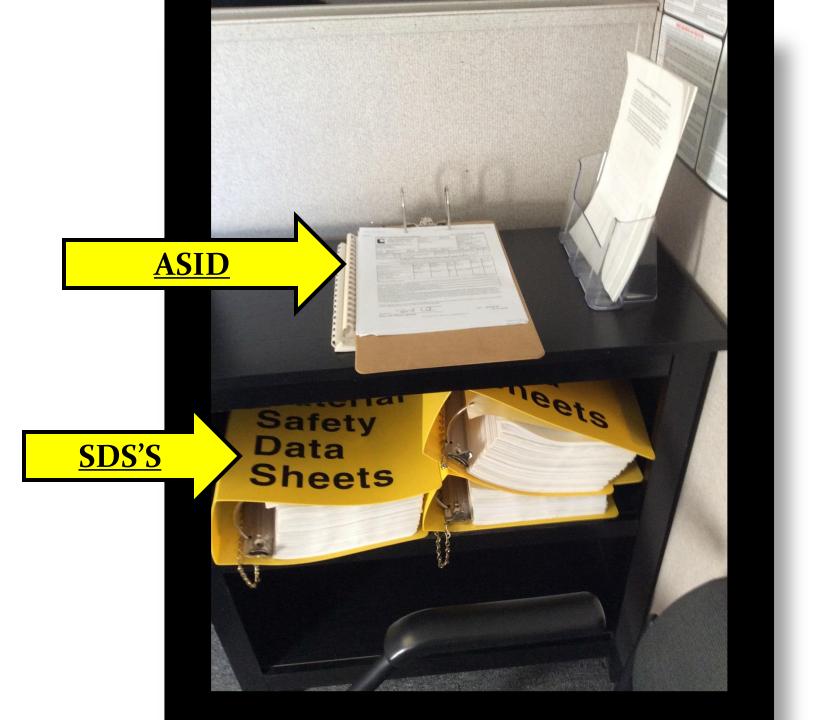
Rec No. 3537626

| | | | | | 0012012010 12.00 | 80701.00170 |
|----|-----------------------------------|--|--|--|--------------------------------------|-------------------------|
| | | | | | | |
| | | | 2EC | COMMENDATION | | # 20506 Date: 09-26- |
| | | | | | · F | roposed: 09-27- |
| | The area or site treated | | | | | Expires: 10-04- |
| 1. | The crop or site treated ———— | Crop: ALMONDS Area: 132; Proposed: 132 Acres | | G | rower: | |
| 2. | Identification of the treated | Apply by: Ground; Gallons / Treated | i Acre: 25 | / | PIXLEY, CALIF | ORNIA 93256 |
| 2. | | Delivery Ticket #: Purchase Order #: | | NO | Applr: GROWER APP | |
| | fields | Pest. Permit#: 54-16-5402027 Field Site & Location / Californi | a Tulora | Contraction of the local division of the second | Fldmn: | |
| 2 | The date(s) and time(s) and | 01-T-2A 01-T-2A, 1/4 N/A 152, E/R Material | | 01-T-2B 01- | T-2B,N/A 152, E/R 120 | 66 |
| 3. | The date(s) and time(s)and | PARAZONE 3SL AI: PARAQUAT | 65222-00130-AA-00000 | R A T E 1.00 Qts / Treated Ac | | 15.00 Gal M |
| | date of the application started 🥰 | RELY 280 | 00264-00829-ZA-00000 | MAKHTESHIM-AGAN 1.00 Qts / Treated Ac | | 15.00 Gal M |
| | | AI: GLUFOSINATE-AMMONIUM | 71058-50002-AA-00000 | BAYER CROPSCI 1.00 Qts / 100 Gal | Target Pest: Common C 1.00 120" | hickweed 3.75 Gal M |
| | and ended | AI: SPREADER | 71058-50004-AA-00000 | IAP 6.00 Oz-/ 100 Gal | Target Pest: *exempt* 6.00 120° | 0.70 Gal M |
| 4. | Restricted entry interval | AL BUFFERING AGENT | SCHOOL STREET, | IAP. | Target Pest: "exempt" | |
| • | _ | ARA N APPLY AS A DIRECTED SPR | WY. | | _ | |
| 5. | Product name(s), U.S. EPA | ARA A APPLY AS A DIRECTED SPR Started: 01-7 Completed 9/27/16 | T-2A 72 | 7 5 | storted 01. | -T-2B |
| - | registration number(s), and | 300 | l. | | | 1345 AM |
| | | 6 and tea | US AM | | | 05 |
| | active ingredient(s) | | 10.14 | | Completer | d 4 m |
| 6 | | 9/27/10 | | | <i>r</i> | 1 10 |
| 0. | Spray adjuvant product | 1. | | | | |
| | name(s) and California | | | | | |
| | | | | | | |
| | registration number(s) if | | | | | |
| | applicable. | | | | | |
| | 1 1 | | | | | |
| 7. | A copy of the Safety Data | | | | | |
| - | Sheet(s) for the applied | PRECAUTION anal Word: DANG | | abel Days to Harvest: 14 | Avold Drift, Water C | ontamination |
| | | *Restricted: YES, See TIFIED APPLR O Non Re-entry Interval: 24 Hours | | Permit Required | Plantback Restrictio | n: YES |
| | pesticide(s) | Feed/Graze Treated Area/Crop: NO | N | Notice of Intent Required | | |
| | 1 () | PEST ARE PRESENT, APPLICATOR USE | CRITERIA / EM | VIRONMENTAL CHANGES | | |
| | | HOUSES OR LIVESTOCK OR ROADS PL | LEASE DO NOT DRIFT TO | O OFF TARGET CROPS. | G CHOPS. WATCH DRIFT (| OF MATERIAL TO |
| | | | | | | |
| | | | | | RECEIVE | DON |
| | | The execution of this recommendation certifies that allo considered and if freebla adopted. | ernative and mitigation measures | that would substantially lessen any s | significant adverse impact on the en | vironment have been |
| | | 1 | | Grower Signature: | SEP 26 | 2016 |
| | | a contraction of the second seco | *** RECOMMENDATION | CONTINUES ON NEXT PA | GE *** | |

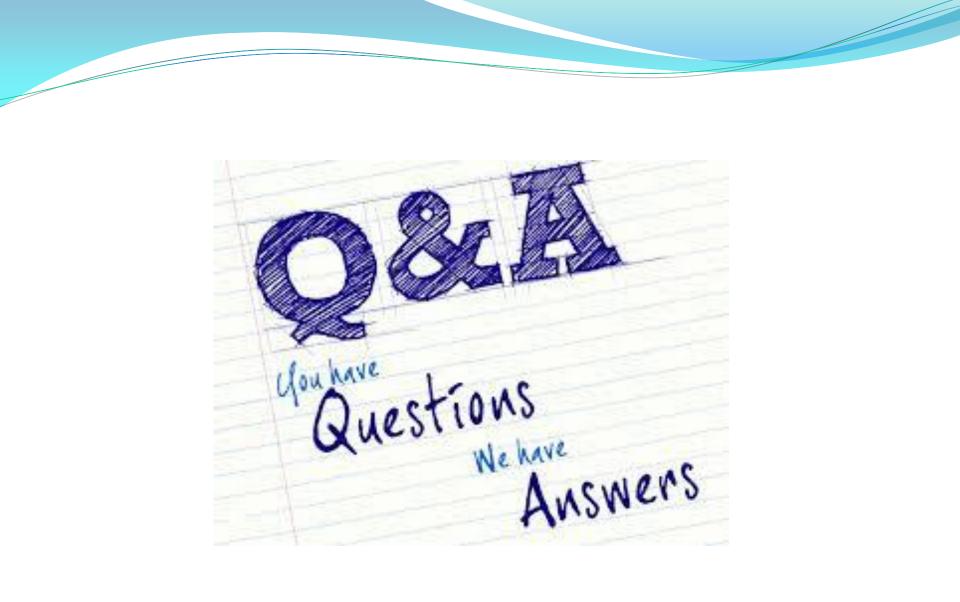












Changes in Closed System and PPE Regulations

Closed Systems

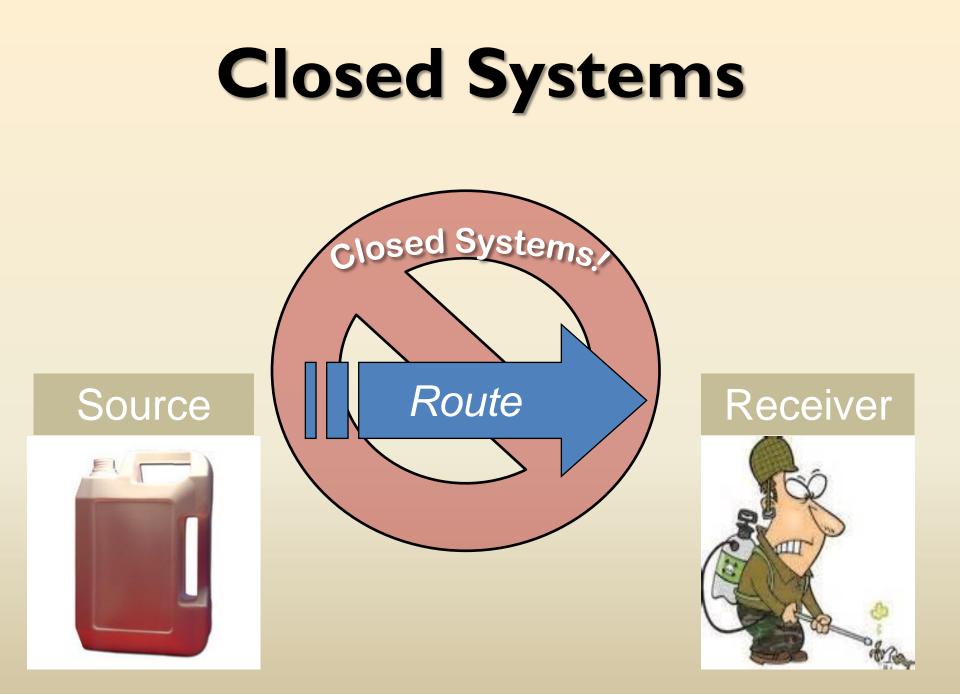
Closed Mixing Systems are engineering controls to protect workers from dermal hazards when mixing pesticides with high acute dermal toxicity.

Capable "of enclosing the pesticide while removing the contents from its original container, preventing the pesticide from contacting handlers or bystanders"









Closed Systems

Direct Exposure
 Splash · Spray · Spill ·
 Indirect Exposure
 Residue · Drift · Off-gassing

History of Closed Systems

- Closed Systems were first considered in 1970's
- For a time in 2009-2011 no closed systems (or replacement parts) were commercially available

History of Closed Systems

- DPR changed what dictated the requirement for closed systems.
- Rather than look at the <u>Signal Word</u> (Danger)
- Now refer to the pesticide label's Precautionary Statements.

History of Closed Systems

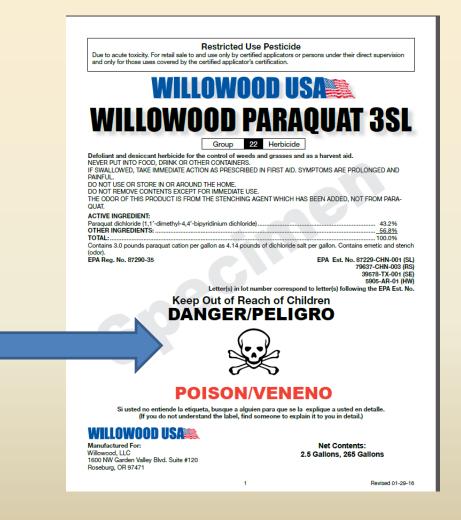
Prior to January 1, 2016

- Signal words were used to determine if a closed system was required.
- Any liquid or liquefiable Category I material had to be mix/loaded through a closed system.

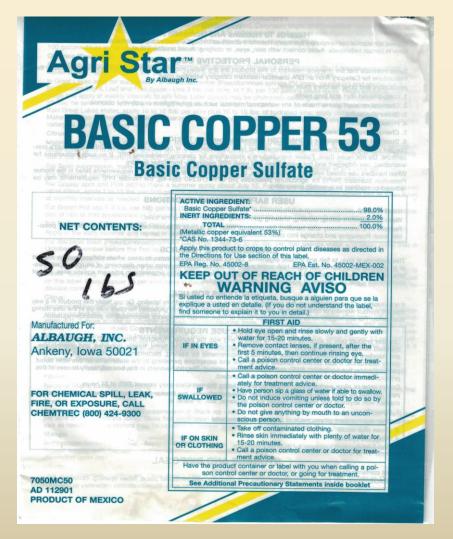
Label Information: Signal Words

Category I: DANGER / POISON Category II: WARNING Category III: Caution

Label Information: Signal Words



 Now (as of January 1, 2016), under Section 6746, use the <u>Precautionary</u> <u>Statements</u> section of the label.



PRECAUTIONARY STATEMENTS WARNING

Hazards To Humans And Domestic Animals

Causes substantial but temporary eye injury. Harmful if absorbed through skin or inhaled. May cause skin sensitization reactions in certain individuals. Avoid contact with skin, eyes, or clothing. Avoid breathing dust.

PERSONAL PROTECTIVE EQUIPMENT

Some materials that are chemical-resistant to this product are any waterproof material. If you want more options, follow the instructions for Category A on an EPA chemical-resistant category selection chart.

- Applicators and other handlers must wear:
- 1. Long-sleeved shirt and long pants
- 2. Chemical resistant gloves made of any waterproof material such as polyethylene or polyvinyl chloride.
- 3. Shoes plus socks
- 4. Protective eyewear
- 5. Chemical-resistant headgear for overhead exposure
- 6. Dust/mist filtering respirator (MSHA/NIOSH approval number prefix TC-21C).

Discard clothing and other absorbent materials that have been drenched or heavily contaminated with this product's concentrate. Do not reuse them. Follow manufacturer's instructions for cleaning/maintaining PPE. If no such instructions for washables, use detergent and hot water. Keep and wash PPE separately from other laundry.

When handlers use closed systems, enclosed cabs, or alrcraft in a manner that meets the requirements listed in the Worker Protection Standard (WPS) for agricultural pesticides [40 CFR 170.240 (d)(4-6)], the handler PPE requirements may be reduced or modified as specified in the WPS.

USER SAFETY RECOMMENDATIONS

Users should:

Wash hands before eating, drinking, chewing gum, using tobacco or using the toilet.

Remove PPE immediately after handling this product. Wash the outside of gloves before removing. As soon as possible, wash thoroughly and change into clean clothing.

ENVIRONMENTAL HAZARDS

This pesticide is toxic to fish and aquatic organisms. Do not apply directly to water, to areas where surface water is present or to intertidal areas below the mean high water mark. Do not contaminate water when disposing of equipment washwaters. Drift and runoff from treated areas may be hazardous to fish and aquatic organisms in adjacent aquatic sites. Do not contaminate water by cleaning of equipment or disposal of wastes.

DIRECTIONS FOR USE

It is a volation of Federal law to use this product in a manner inconsistent with its labeling. Do not apply this product in a way that will contact workers or other persons, either directly or through drift. Only protected handlers may be in the area during application. For any requirements specific to your State or Tribe, consult the agency responsible for pesticide regulation.

AGRICULTURAL USE REQUIREMENTS

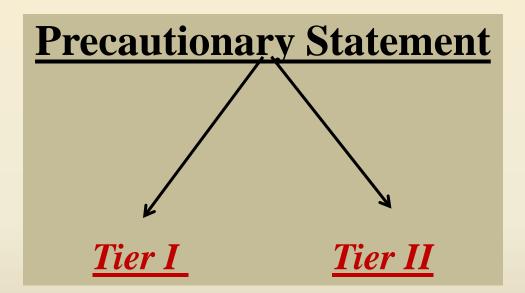
- 2. Chemical-resistant gloves made of any waterproof material
- 3. Shoes plus socks
- 4. Protective evewear
- 5. Chemical-resistant headgear for overhead exposure

STORAGE AND DISPOSAL

Do not contaminate water, food or feed by storage or disposal.

STORAGE: Store only in original container. Store in a cool, dry, well ventilated place. When opening, closing or handling open packages, or pouring product, wear goggles to prevent dusting into eyes. Store pesticides separately to prevent cross

Closed Mixing System Requirements Tier Identifiers



Depending on the Precautionary Statement, the product is considered Tier I or Tier II

Closed Systems

Tier I

Tier II

"<u>Fatal</u> if absorbed through skin" or comparable language "<u>May be fatal if</u> absorbed through skin" or "Corrosive, Causes skin damage"

*A Substance that has power to cause *irreversible damage* or destroy another substance by *contact*.*

PRECAUTIONARY STATEMENTS HAZARDS TO HUMANS AND DOMESTIC ANIMALS FATAL IF SWALLOWED, INHALED OR ABSORBED THROUGH THE SKIN, CAUSES IRREVERSIBLE EYE DAMAGE. CAUSES SKIN IRRITATION. MAY CAUSE ALLERGIC SKIN REACTION

This Precautionary Statement on a label would require a Tier I closed mixing system.

PRECAUTIONARY STATEMENTS HAZARDS TO HUMANS AND DOMESTIC ANIMALS

Corrosive. Causes irreversible eye damage. **Causes skin burns.** Harmful if swallowed or if absorbed through skin. Do not get in eyes, on clothing, or on skin. Mixers, loaders, applicators and other handlers must wear: Coveralls over long-sleeved shirt and long pants

This Precautionary Statement on a label would require a Tier II closed mixing system.

PRECAUTIONARY STATEMENTS HAZARDS TO HUMANS AND DOMESTIC ANIMALS

May be fatal if swallowed. Causes substantial but temporary eye injury. Do not get in eyes, on skin, or on clothing. Wear protective eyewear (goggles, face shield, or safety glasses). Causes skin irritation. Harmful if inhaled or if absorbed through skin. Avoid breathing vapor or spray mist. Wash thoroughly with soap and water after handling and before eating, drinking, or using tobacco. Remove contaminated clothing and wash clothing before reuse.

This Precautionary Statement on a label would **NOT** require a closed mixing system.

Closed System

What is the big difference between **Tier I** and **Tier II** systems?

Closed Systems Tier I Tier II

- Remove pesticide from container
- Rinse container and extract rinsate <u>without</u> <u>removal</u> from the extraction system
- Classic closed system

Remove pesticide from container

- Container rinsing and subsequent rinsate removal <u>may be done</u> <u>otherwise</u>
- Closed system

Closed Mixing System Requirements Section 6746 (d)(e)

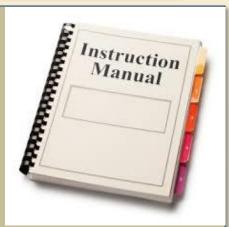
- Users must be trained in the specific use of the closed system and in the requirements of *Title 3 CCR Section* 6724: Handler Training
- All PPE required by label, restricted material permit or regulation <u>must be at the worksite</u>.
- Protective eyewear <u>must always</u> be worn when using a closed system.



Closed Mixing System Requirements Section 6746 (g)

Written, LEGIBLE, operating instructions must accompany the system.

- Instructions must include:
- Operating procedures
- Maintenance cleaning and repair instructions
- Restrictions/limitations of the equipment
- Procedures for handling partials (if applicable)



- System must be maintained as specified in the written operating instructions.
- Visit the DPR website for reference

Closed Mixing System Requirements Section 6746 (h)

Exemptions:

- Label mandated method or device
- Foil seal removal/reseal is not a violation
- Regulatory sampling
- Returnable containers not required to rinse
- 1 gallon or less of Tier II material

Closed Systems

Health and Safety Repa Worker Health and Safety Branch

Guidelines for Developing and Manufacturing a Closed System Compliant with the Requirements of Title 3 California Code of Regulations Section 6746

By

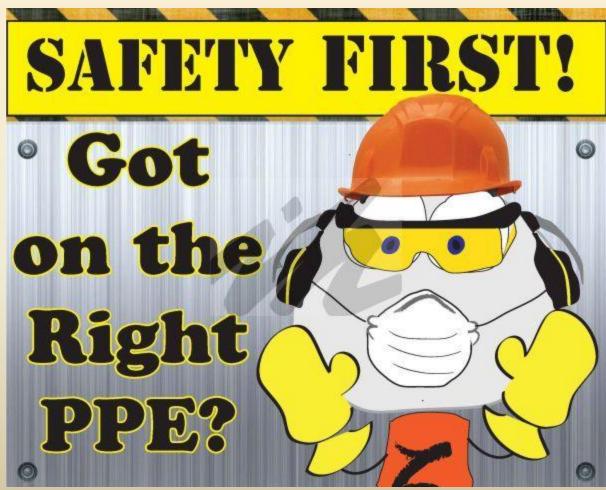
Harvard R. Fong, CIH, Senior Industrial Hygienist

November 16, 2015

CALIFORNIA ENVIRONMENTAL PROTECTION AGENCY DEPARTMENT OF PESTICIDE REGULATION 1001 I STREET, SACRAMENTO, CA 95814 For guidance on developing a closed system, WH&S has created HS Report 1899.

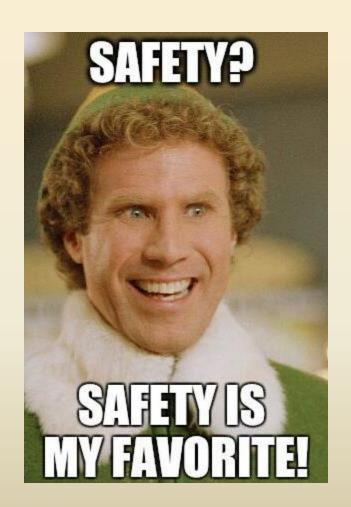
This is available at www.cdpr.ca.gov

Personal Protective Equipment (PPE)



PPE Functions

- Body Coverage
- Eye Protection
- Extremities Protection



PPE (Care) DPR Regulation, 3 CCR 6738

EMPLOYERS shall provide all necessary PPE, as required by label, permit condition and regulation, keeping it clean and in good repair.

Equipment must be inspected daily.

Heavily contaminated PPE shall be replaced.

Store clean PPE in a specifically designated, *pesticide-free area*.



PPE (Care) DPR Regulation, 3 CCR 6738

- Make sure PPE is used *properly*
- Store and wash used PPE separate from other laundry; dry PPE properly.
- Make sure the personnel maintaining/cleaning PPE know what they're doing
- Never allow contaminated PPE to be taken into worker homes.
- If worker does not return to headquarters, provide <u>sealable container</u> for worker to store contaminated equipment outside of home.



PPE (Use) DPR Regulation, 3 CCR 6738.1

EMPLOYERS shall assure that employees wear:

- Eye protection (Section 6738.2) when mixing/loading or applying pesticides by hand or ground rig, or otherwise exposed to contaminated equipment
- Chemical-resistant gloves (Section 6738.3) when mixing/loading or applying pesticides by hand or ground rig, or otherwise exposed to contaminated equipment





PPE (Use) DPR Regulation, 3 CCR 6738.1

EMPLOYERS shall assure that employees wear:

- Chemical-resistant footwear (boots, shoes or coverings) when required.
- Chemical-resistant hood or wide-brim hat when chemical-resistant head protection is required.
- Coveralls when handling Category I (Danger) or Category II (Warning) pesticides. This does <u>NOT</u> apply to fumigants unless otherwise required by label.



PPE (Use) DPR Regulation, 3 CCR 6738.1

EMPLOYERS shall assure that employees wear:

Chemical resistant apron when required



Chemical resistant coveralls when required



[1] Note that 80%/85% heat stress regulation (separate from Cal/OSHA Heat Illness Standard) applies when wearing chemical-resistant coveralls. Exemption for closed systems, enclosed cabs or other engineering thermal controls or cooled PPE.

PPE (Eye Protection) DPR Regulation, 3 CCR 6738.2

Employers shall assure that employees wear protective eyewear that provides brow and temple protection, conforming to the curvature of the face.

Must be ANSI Z87.1 -2010 compliant



- If the label identifies specific protective must be worn.
- NIOSH-Approved full-face respirator satisfies eye protection requirement.
- Prescription eyewear may not interfere with fit/function of protective eyewear & vice-versa.

PPE (Hand Protection) DPR Regulation, 3 CCR 6738.3

EMPLOYERS shall assure that employees wear appropriate chemical-resistant gloves when required

- If the barrier material is specified by a glove category, that material must be used.
- If there is no specific glove material specified on the label ("use chemical-resistant gloves") then any of the gloves listed in the DPR Glove Category Selection Key card may be used

| Label Code | Materials Required by Law | Material Code |
|---------------|------------------------------|------------------|
| A | 1,2,3,4,5,6,7,8 | 1: Laminate |
| A B C | | 2: Butyl |
| C | 1,2 1,2,3,4,7,8 | 3: Nitrile |
| D | 1,2 | 4: Neoprene |
| E F | 1,3,4,8 | 5: Natural |
| F | 1,3,4,8 1,2,3,8 | 6: Polyethylene |
| G | 1,8 | 7: PVC |
| H | 1,8 | 8: Viton |

All but Laminate and Polyethylene must be 14 mils or thicker

PPE (Hand Protection) DPR Regulation, 3 CCR 6738.3

- Other than laminate and polyethylene, all gloves must be 14 mils or thicker
- Separable glove liners are allowed unless expressly forbidden by the label.
- Liners must not extend beyond cuff of glove.
- Contaminated liners must be removed immediately and all liners must be disposed of at the end of the day.

PPE (Hand Protection) DPR Regulation, 3 CCR 6738.3

- Leather gloves may be worn over chemicalresistant gloves if required by work environment.
- After such use, those leather gloves must always be worn over chemical-resistant gloves.



PPE (Exemptions) DPR Regulation, 3 CCR 6738.4

EMPLOYERS shall assure that all necessary/required PPE is present and available at the worksite and stored to prevent contamination.

Glove **and** Eye protection exemptions:

[1] Enclosed cab

[2] Vehicle-mounted nozzles below employee and spraying downward

[3] Long handled vertebrate pest control baiting devices

[4] No contact with liquid fumigants

[5] Application system, as determined by DPR, that provides equal or superior exposure protection as PPE

[6] Operating aircraft

PPE (Exemptions) DPR Regulation, 3 CCR 6738.4

EMPLOYERS shall assure that all necessary/required PPE is present and available at the worksite and stored to prevent contamination.

Eye protection exemptions:

[1] Applying non-insecticidal lures or baiting monitoring traps[2] Applying solid fumigants to vertebrate burrows[3] Applying vertebrate baits that are NOT propelled

PPE (Eye Protection) DPR Regulation, 3 CCR 6738.2

The American Academy of Ophthalmology:

- 1. 300,000 emergency room visits for occupational eye injuries in 2012
- 2. 20,300 occupational eye injuries resulted in lost work time
- 3. An estimated 90% of these eye injuries were preventable with protective eyewear.





No Gloves?





Eye Protection only works if you actually wear it...





If you are agitated & confused my work here is done



Any Questions... Just Ask!















Tulare County Agricultural Commissioner 2016 Continuing Education: Notices of Intent



Pesticide Use Reports

CCR 6428 & 6434. Notice of Intent.

6434 (a) If the information required by (g), (h), and (i) of Section 6428 is not provided on the permit, it shall be included in the notice of intent.

6428 (g) Approximate date(s) or crop stage(s) of intended restricted material application(s);

(h) Expected method of application including the dilution, volume per acre or other units, and dosage;

(i) Name of the pest control business, if any, and name, business address, and license or certificate number, with expiration date, of the certified private or certified commercial applicator responsible for supervising the possession or use of the restricted material(s).

(b) When a notice of intent is required by the commissioner, it shall provide the following information concerning the proposed application. If the information required by this paragraph has been provided on the permit, it may be referenced on the notice of intent.

(1) Permit number;

(2) Name and address of permittee and applicator;

(3) Location of areas to be treated and name of farm operator;

(4) Crop or commodity, or if there is no crop or commodity the site to be treated;

(5) Approximate acres or other units;

CCR 6434 Notice of Intent.

(6) Method of application;

(7) Pesticide(s);

(8) Dilution, volume per acre or other units, and dosage;

(9) Pest(s) to be controlled;

(10) Date intended application is to commence; and

(11) Location and identity of areas specified in Section 6428 which have changed since the permit was issued and which may be adversely impacted. A map or aerial photograph may be used for designating such locations.

The commissioner shall be notified at least 24 hours prior to commencing the use of a pesticide requiring a permit. The notice of intent to apply a pesticide may be submitted to the commissioner by the operator of the property to be treated, by such operator's authorized representative, or by the licensed pest control operator who is to apply the pesticide. The commissioner may allow less than 24 hours notice if he determines that because of the nature of the commodity or pest problem effective pest control cannot be attained or when 24 hours are not necessary to adequately evaluate the intended application.

So, what does all that mean? Fill in all the blanks and you've got it!

STATE OF CALIFORNIA PR-ENF-126X (REV. 11/07) Page 1 of 1

NOTICE OF INTENT TO APPLY RESTRICTED MATERIALS

DEPARTMENT OF PESTICIDE REGULATION

| NURSERY | | | | | | | | | | |
|--|--------------------|------------------|--------------------|--------|----------|----------------------|-------------------|----------|----------|-------------|
| 54 10 16 : 24 : : | | | | | | | | | | |
| OPERATOR ID/PERMIT NUMBER 5499999 | ENTIFICATION NU | MBER | TOTAL P ACRES/U | NITS | | 4437 S Laspina, ST A | | | | |
| LOCATION NA 400, WR 108 | 51-101 | | BLOCK II |)) | | Tulare, CA, 93274 | | | | |
| DATE/TIME APPLIED ACTUAL TOTAL ACR PROPOSED ACTUAL PROPOS | ES/UNITS TREATED | | DITY/SITE TREATED | | | | | | | |
| 10/20/2016 10 | | | Almo | | | | | | | |
| CHEM NO. MANUFACTURE/NAME OF PRODUCT APPLI | ED ÉPA/C | ALIF. REGISTRATI | ON NUMBER FROM I | ABEL T | OTAL PRO | DOUCT US | ED | RATE | DILUTION | TARGET PEST |
| PARAZONE 3SL | 6 | 66222-1 | 30-AA | ļ | | | | 1 oz | 25 Gal | Grass |
| | | | | ç | | | | | | |
| ······································ | | | | 0 | | | | | | |
| | | | | | | | | | | |
| | | | | 1 | | | | | | |
| DAYS REENTRY DAYS PREHARV | ERVISED BY | | | | | mond | Almon | d Almono | | |
| ENVIRONMENTAL CHANGES/COMMENTS | PCA NAME | | | | | Imond | TREATMENT AREA | Almono | | |
| RECEIVED BY | DATE BOX NUMBER | DATE | | 'ED | | | | | | AIMON |

1) CAC Submit to AGRICULTURAL COMMISSIONER at least 24 hours prior to application

2) CAC Submit to AGRICULTURAL COMMISSIONER within 7 days of application

3) APPLICATOR COPY

4) GROWER COPY

CCR 6650 & 6654. Bee Clearances

• 6650. Pesticides Toxic to Bees.

- (a) Pesticides toxic to bees are those that include the words "toxic to bees" on the labeling of the pesticide, regardless of modifying words on the label that state "highly" or "moderately."
- (b) Bees are considered to be inactive from one hour after sunset to two hours before sunrise or when the temperature is below 55 degrees Fahrenheit. The sunset and sunrise times will be those indicated in the local newspaper.
- (c) Residual toxicity (RT) time is that period of time after completing a pesticide application until there is minimal toxic effect to bees. The RT time is specified on product labeling and is based upon Residual Toxicity25 (RT25) studies. RT25 studies determine 25 percent bee mortality based on the test bee population exposed to the formulated pesticide product applied to foliage.

CCR 6650 & 6654. Bee Clearances

• 6654. Notification to Beekeepers.

- (a) Each person intending to apply any pesticide toxic to bees to a blossoming plant shall, prior to the application, inquire of the commissioner, or of a notification service designated by the commissioner, whether any beekeeper with apiaries within one mile of the application site has requested notice of such application.
- (b) If the person performing pest control is advised of a request for notification, he or she shall notify the beekeeper, at least 48 hours in advance of the application, of the time and place the application is to be made, the crop and acreage to be treated, the method of application, the identity and dosage rate of the application to be applied, and how the person performing pest control may be contacted by the beekeeper. This time may be increased or decreased by the commissioner, or by an agreement of both the beekeeper and the person performing the pest control work.

Applications to <u>Citrus</u> prior to the <u>PETAL FALL Declaration</u>: <u>PETAL FALL</u> Waiver Requests must be approved by the Tulare County Agricultural Commissioner prior to obtaining a bee clearance.

ABC Spraying

123-456-7890

(Applicator) 123 Spray Ave, Tulare (Address)

| 789-0123 |
|---------------|
| Return FAX #) |

(Phone number)

| Grower | Proposed Date of Application | # Acres | Crop | Pesticide | Location – Direction & Distance from Ave / Road i.e.: NA 220, ER 144 | Pin Numbers |
|-----------|------------------------------------|------------|--------|-----------|--|-------------|
| Beta | 10/31/16 | 10 | Almond | Vulcan | | |
| Permittee | | | Aimonu | vuicari | NA 400, WR 108 | 100, 50, 25 |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |

Inspector:_____ Date: _____ Time: _____

Remarks:

6624. Pesticide Use Records

Who needs to keep records of Pesticide Use?

- (a) The following persons shall maintain records of pesticide use:
 (1) Any person who uses a pesticide for an agricultural use
 (2) Any person who uses a pesticide listed in section 6400 (Restricted Materials)
 - (3) Any person engaged for hire in the business of pest control;(4) Any person who uses a pesticide for industrial post-harvest commodity treatment; and
 - (5) Any person who uses a pesticide listed in section 6800(b) for any outdoor institution or outdoor industrial use.

6624. Pesticide Use Records What records need to be kept?

(b) The records shall include the following information for each pest control operation:

- (1) Date of application;
- (2) Name of the operator of the property treated (Permit Name)
- (3) Location of property treated (as shown on your permit)
- (4) Crop commodity, or site treated;
- (5) Total acreage or units treated at the site; and

(6) Pesticide, including the U.S. Environmental Protection Agency (U.S. EPA) or State registration number which is on the pesticide label, and amount used.

6624. Pesticide Use Records

(c) In addition to the information required in subsection (b), the operator of the property which is producing an agricultural commodity, and an agricultural pest control business applying pesticides to such property, shall include in the records the following information for each pest control operation:

(1) Location of the property treated, by county, section, township, range, base and meridian

(2) Hour the treatment was completed

(3) The operator identification number issued to the operator of the property treated (or permit number

(4) The site identification number issued to the operator of the property treated

(5) Total acreage (planted) or units at the site; and

(6) Name or identity of the person(s) who made and supervised the application, if the pesticide application was made by an agricultural pest control business.

(d) The operator of the property which is producing an agricultural commodity shall maintain records of pesticides applied by an agricultural pest control business to such property, **by site**.

6624. Pesticide Use Records

(e) In addition to the information required in (b), effective January 1, 2002, persons engaged for hire in the business of pest control at a school site [defined in Education Code section 17609(e)] shall include in the records the following information for each pest control operation:

- (1) Time application was completed;
- (2) Name and address of the school site; and

(3) Application location at the school site. For purposes of this subsection, location includes, but is not limited to, classrooms, playgrounds, cafeteria, vehicles, and athletic fields.

(f) In addition to the information required in subsections (b) and (c), persons who use methyl bromide, 1,3-Dichloropropene, chloropicrin, metam-sodium, N-methyl dithiocarbamate (metam-potassium), dazomet, methyl iodide, or sodium tetrathiocarbonate field fumigants within the Sacramento Metro, San Joaquin Valley, South Coast, Southeast Desert, or Ventura ozone nonattainment areas shall include in the records a description of the method of application pursuant to sections 6446.1, 6447.3, 6448.1, 6449.1, 6450.1, 6450.2, 6451.1, or 6452.

(g) The records required pursuant to this section shall be **retained for two years** and made promptly available to the director or commissioner upon request.

6626. Pesticide Use Reports for Production Agriculture.

Who needs to Report the Use of Pesticides?

(a) The operator of the property which is producing an agricultural commodity shall report the use of pesticides applied to the crop, commodity, or site to the commissioner of the county in which the pest control was performed. This report must be submitted by the 10th day of the month following the month in which the work was performed. This report is not required if the pesticide use is reported to the commissioner by pest control business as specified in subsection (b); however, the operator of the property treated, shall retain a copy of the business' "Report by Site" for two years.

6626. Pesticide Use Reports for Production Agriculture

(b) An **agricultural pest control business** shall report the use of pesticides applied by it for the production of an agricultural commodity to the commissioner of the county in which the pest control was performed. This report must be **submitted within seven days of completion of the pesticide application**. A copy of the report shall be sent by the business to the operator of the property where the pest control was done within 30 days of completion of the pesticide application.

6626. Pesticide Use Reports for Production Agriculture <u>How do I report the use of a pesticide?</u>

(c) Each report of pesticide use pursuant to this Section shall be on a department form or in a format approved by the director. Acceptable department forms include form 38-017 for an operator of the property to report pursuant to subsection (a), and 39-025 for an agricultural pest control business to report pursuant to subsection (b). The information to be reported shall include the information specified in Section 6624, and the name and address of the agricultural pest control business which made the application, if such a business made the application. (Paper or Electronic)

(d) A use report required by (a) or (b) for the application of a field soil fumigants in the Sacramento Metro, San Joaquin Valley, South Coast, Southeast Desert, and Ventura ozone nonattainment areas shall include the information specified in 6624(f) in addition to that required by this section.

(e) If the report is mailed, the postmark shall be the date of delivery.

(f) If the county in which work was performed has no commissioner, the report shall be made to the director.

Month¹

Nursery ³

PRODUCTION AGRICULTURE MONTHLY PESTICIDE USE REPORT

Township

362101

Base & Meridian

Submit to the Agricultural Commissioner within 10 days of the n

This report is used for grower applied (non-commercial) spray applications on a single site to an agricultural commodity, such as grapes or wheat.

Range

| Operator ID/Permit No. | Operator (Grower) |
|-------------------------|---------------------------|
| 4 | 5 |
| Site Identification No. | Total Planted Acres/Units |
| | |

Year 2

| 9 | .: | 10 | | 11 | 12 | | 13 | N | 🗌 s | 14 | 🗌 E | | [] М | 🗌 н |
|-----------------|------------|--------------------|--|----------------|------------------|-------|-------------------|----------|----------|----------|------------|---------------------------------------|------|-----|
| Commodity/Si | te Treated | | | | Field Loca | ation | | | | | | · · · · · · · · · · · · · · · · · · · | | |
| 10 | | | | | | | | | | | | | | |
| 16 Date/Time | Acreage/ | Application Method | Block ID | EDA or State D | egistration Numb | | | | 1 | 1 | T | | | |
| Application | Units | (Check One) | 21 (If | (From | m Label) | T | otal Product Used | Days | Rate | Dilution | Product ar | nd Manufacturer | | |
| 18Completed | 19 Treated | 20 | Applicable) | 22 | , | 23 | | Reentry | Per Acre | 26 | 27 | | | |
| | | Ground | | | | | | | | | T | | | |
| | | Air | 1 | · · | | | | | | | | | | |
| | | Fume | - | | | | | | | | | | | |
| | | Other | | | | LB | OZ PT QT GA | · | | | | | | |
| | | Ground | | | | | | | | | | | | |
| | | Air | | | | | | | | | | | ÷. | |
| | | Fume | - | | | | | | | | | | | |
| | | Other | | | | LB | OZ PT QT GA | | | | | | | |
| | - | Ground | 1.0 | | | | | | | | | | | |
| | | Air | | | | | | | | | | | | |
| | | Fume | - | | | | | | | | | | | |
| | | Other | | | | LB | OZ PT QT GA | | | | | | | |
| | | Ground | | | | | | | | | | - | | |
| | | Air | | · · | | | | | | | | | | |
| | | Fume | - | | | | | | | | 19 | | | |
| | | Other | | | | LB | OZ PT QT GA | | | | | | | |
| | | Ground | | | | | | | | | | | | |
| | | Air | | | | | | | | | | | | |
| | | Fume | ~ | | | | | | | | | | | |
| | | Other | | | | LB | OZ PT QT GA | <i>۱</i> | | | | | | |
| | | Ground | | | | | | | | | | | | |
| | 1 | Air | | | | | | | | | | | | |
| | | Fume | _ | | | | | | | | | | | |
| | 1 | Other | Automa in the second seco | | | LB | OZ PT QT GA | | | - | | | | |

County Number

Section

Report Prepared By

Date

Reviewed By

For Agency Use Only

(1) CAC

| 36 2 1 | 20 10 10 10 | 26 20 2 | | 26 | 177 | 26 -26 12 | 26 | - 12 M | 1. |
|----------------|--|-------------------------|-----------------|---|----------------------------|------------------------------|------------------------|---------------|--|
| | C | O | O | 0 | 0 | . 0 | S() | Ď | 0 |
| | STATE OF CALI PR-ENF-025 (RE | | CTAT | PE | STICIDE US | E REPORT | DEPARTM | ENT OF PESTIC | IDE REGULATION |
| | Page 1 of 1 | RSERY | | | | | | 31 | .0376 |
| | COUNTY NO. SE | CTION TOWNSHIP RAI | | PP. METHOD F GROUND AIR FUME OTHER 67 | PERMITTEE/PROPERTY OPERAT | OR | APPLICATOR NAME AND AI | DDRESS | |
| PASSED, | OPERATOR ID/PER | RMIT NUMBER | | SITE IDENTI | FICATION NUMBER | TOTAL PLANTED ACRES/UNITS | | | |
| | 8 LOCATION | | | 9 | | 10 BLOCK ID | | | |
| The last | | | | | | (IF APPLICABLE) | | | |
| J. S. S. | 11 DATE/TIME APPLIE | Ð | ACRES/UNITS TRE | ATED | COMMODITY/SITE TRE | 12 ATED | . 13 | | |
| Page 1 | 14 | | 15 | | 16 | | | | |
| | CHEM NO. MA 17 18 | NUFACTURER/NAME OF PROI | DUCTS APPLIED | EP/ 19 | VCALIF. REGISTRATION NUMBE | R FROM LABEL | TOTAL PRODUCT USED | RATE 21 | DILUTION 22 |
| This ro | nort is | for a sinc | ile annl | ication | of a pest | ticide to a | 0Z. PT. QT |] [] GA. | |
| | - | | | | by a cor | | A |] | ۰ ۱ |
| | applicator (pest control business), or when a grower doesn't expect to make more applications to the site | | | | | | | | |
| during | - | | | | | | OZ. PT. QT |] | |
| | | | | | | | 02. PT. QT |] | |
| CPR CALL STORE | | | | | | | | | |

| | | | | LD. OL. 11. Q1. On. | |
|------------|----|-----------------|---|---------------------|---------------|
| | | | | LB. OZ. PT. QT. GA. | |
| DAYS REENT | RY | DAYS PREHARVEST | APPLIED/SUPERVISED BY | | |
| 24 | | 25 | 26 | | |
| | | | DMMISSIONER within 7 days of application. copy - Applicator; Goldenrod copy - Grower | | OSP 08 111651 |

6627. Monthly Summary Pesticide Use Reports.

(a) Except as provided in section 6626, persons required to maintain pesticide use records pursuant to section 6624 shall report a summary of the monthly use of pesticides to the commissioner of the county in which the work was performed. The report shall be provided to the commissioner by the 10th day of the month following the month in which the work was performed. If the report is mailed, the postmark shall be the date of delivery.

(b) The report shall be in a format approved by the director. The report shall include the following:

(1) The name and address of the person who or business/organization which applied the pesticide(s);

(2) County where the pest control was performed;

(3) Month and year of pesticide use;

(4) Crop, commodity or site treated, except when using a designated use code, as specified on the Monthly Summary Pesticide Use Report form;

(5) Pesticide, including the United Stated Environmental Protection Agency or State registration number which is on the pesticide label, and the amount used;

RESTRICTED USE P

FOR RETAIL SALE TO AND USE ONLY BY CERTIFIED APPLICATORS OR P AND ONLY FOR THOSE USERS COVERED BY THE CERTIFIED

Parazone[®] 3SL

A Weed, Grass, and Harvest Aid Desiccant/Defoliant Herbicide

| ACTIVE INGREDIENT: | % BY WT. |
|--|----------|
| Paraquat dichloride (1,1'-dimethyl-4,4'-bipyridinium dichloride) | |
| OTHER INGREDIENTS: | |
| TOTAL. | |

Contains 3.0 pounds paraquat cation per gallon (4.14 pounds salt per gallon).

Contains steriching (odor) and emetic. EPA Reg. No. 66222-130

EPA Est. No. 8404/-CHN-001

DANGER / PELIGRO

Si usted no entiende la etiqueta, busque a alguien para que se la explique a usted en detalle. (If you do not understand the label, find someone to explain it to you in detail.)

NEVER PUT INTO FOOD, DRINK, OR OTHER CONTAINERS. • IF SWALLOWED, TAKE IMMEDIATE ACTION AS PRESCRIBED IN FIRST AID. SYMPTOMS ARE PROLONGED AND PAINFUL. • DO NOT USE OR STORE IN OR AROUND THE HOME. • DO NOT REMOVE CONTENTS EXCEPT FOR IMMEDIATE USE. • THE ODOR OF THIS PRODUCT IS FROM THE STENCHING AGENT WHICH HAS BEEN ADDED, NOT FROM PARAQUAT.

FIRST AID Contains Paraquat, a Bipyridylium Herbicide

IF SWALLOWED: SPEED IS ESSENTIAL. Immediate medical attention is required. If available, give an adsorbent such as activated charcoal, bentonite, or Fuller's Earth. Call a poison control center or doctor immediately for treatment advice. Do not give anything by mouth to an unconscious person. Have person sip glass of water if able to swallow. Do not induce vomiting unless told to by a poison control center or doctor.

IF INHALED: Move person to fresh air. The odor of this product is from the stenching agent, which has been added, not from the paraquat. If person is not breathing, call 911 or an ambulance. Call a poison control center or doctor for further treatment advice.

IF IN FYES: Hold are open and rinse slowly and nearly with water for 15.20 minutes. Remove contact

Pro 90 SPREADER • ACTIVATOR

CA Reg. No. 71058-50002

KEEP OUT OF REACH OF CHILDREN WARNING

Hazard Statements:

Causes serious eye irritation. Harmful if swallowed.

See Inside Booklet for Additional Precautionary Statements and Complete Directions for Use.



Manufactured for:

Integrated Agribusiness Professionals

7108 N Fresno St., Suite 150 Fresno, CA 93720

2016-04 (GHS)

Locate the United Stated Environmental Protection Agency or State registration number which is on the pesticide label.

6627. Monthly Summary. Pesticide Use Reports.

(6) Number of applications made with each pesticide and the total number of applications made during the month; and

(7) Total acres or units treated with each pesticide, except when using a designated use code, as specified on Summary Pesticide Use Report form.

(c) If the county in which the work was performed has no commissioner, the report shall be made to the director.

STATE OF CALIFORNIA MONTHLY SUMMARY PESTICIDE USE REPORT

DPR-ENF-060 (REV. 4-12) PAGE 1 OF 2

INSTRUCTIONS FOR COMPLETING THIS FORM ARE INDICATED BELOW AND ON THE REVERSE SIDE

| | OPERATOR (FIRM NAME) | ADDRES | S | CITY | | ZIP | CODE | PHONE NUMBER | |
|------|--|---|--|--|--|---|---|------------------------------|------------------------|
| | OPERATOR ID/PERMIT NUMBER | LICENSE NUMBER | COUNTY WHERE APPLIED | COUNTY NU | MBER MC | INTH/YEAR OF | USE | TOTAL NUMBER OF APPLICATIONS | |
| | Code 30 - Landscape Maintenan Code 40 - Right-of-Way Pest Cor Code 50 - Public Health Pest Cor Code 80 - Vertebrate Pest Contro Code 91 - Commodity Fumigation | e of the following codes: includes includes itrolincludes itrolincludes includes includes (Nonfood/Nonfeed)includes rolincludes | s any pest control work performed w s any pest control work performed of any pest control work performed a s any pest control work performed b s any vertebrate pest control work s fumigation of nonfood/nonfeed co s any pest control work performed b ve codes | n landscape plantings arou long roadsides, power line by or under contract with St performed by public agenci mmodities such as pallets, | und residences s, median strip: ate or local pub es or work und dunnage, furni | or other build s, ditch banks blic health or t er the superv ture, burlap t | and similar sites. vector control agenci ision of the State or c ags, etc. | es. | |
| | A | | B | С | D | E | F | 00 0/TE | G |
| | MANUFACTURER AND NAME OF PRODUCT APPLIED | | STRATION NUMBER FROM LABEL | TOTAL PRODUCT USED (Check One Unit of Measure |) NUMBER O APPLICATIO | | COMMODITY TREATI | | ACRES/UNITS TREATED |
| | | | | LB OZ PT QT GA | | | | <u></u> | |
| | eport is for No | | | | | | | | |
| | ulture, such as hts-of-way, fer | | | | | | | | |
| iigi | | | a Commodity | | 0. | | | | |
| | | | | LB OZ PT QT GA | | | | | |
| | | | | LB OZ PT QT GA | | | | | |
| | | | | | | | | | |

REPORT PREPARED BY

DATE

Distribution: CAC - Two copies; Report preparer - One copy

6628. Negative Pesticide Use Reports.

(a) When, during any month, a **licensed agricultural pest control business** performs no pest control work in a county where the business is registered with the commissioner pursuant to Food and Agricultural Code section 11732, he/she shall submit a report stating this fact to the commissioner, or to the director in any county where there is no commissioner, by the 10th day of the following month.

(b) When, during any month, a **licensed structural pest control operator** performs no pest control work in a county in which he provided notice of business operation to the commissioner pursuant to section 15204 of the Food and Agricultural Code, he/she shall submit a report stating this fact to the commissioner, or to the director in any county where there is no commissioner, by the 10th day of the following month.

(c) If the report is mailed, the postmark shall be the date of delivery.

STATE OF CALIFORNIA DPR-PML-025 (REV. 08/15) Page 1 of 2

PESTICIDE USE REPORT

| | -PLANT PPLICABLE) | | | | | | | | |
|-----------------------|--|---|--------------------|-----------------------------|---|-------------------------|------------|----------------|--|
| COUNTY NO. | SECTION TOWNSHIP RANGE | E BASE & APP. METHOD MERIDIAN S GROUND | F | PERMITTEE/PROPERTY OPERATOR | | APPLICATOR NAME AND ADD | DRESS | | |
| 2 ⁵⁴ | $ \begin{array}{c ccccccccccccccccccccccccccccccccccc$ | | | Beta Permitee | ta Permitee Grower Applied 4437 S Laspina, ST A Tulare, CA, 93274 | | | | |
| OPERATOR ID | PERMIT NUMBER | SITE | IDENTIFICATIO | ON NUMBER | TOTAL PLANTED ACRES/UNITS | | | | |
| 5499999 | | | -101 | | 11 10 | | | | |
| 9 LOCATION | | 10 | | | BLOCK ID | _ | | | |
| NA 400, WR 108 | | | | | | | | | |
| NA 400, 12 | WK 108 | | | | 13 | 14 | | | |
| DATE/TIME AP | PLIED | ACRES/UNITS TREATED | | COMMODITY/SITE TREATED | 1 | | | | |
| 10/20/20 15 | 16 | 10 16 | | Almond | | | | | |
| CHEM NO. 18 | MANUFACTURER/NAME OF PRODUC | CTS APPLIED | EPA/CALIF | REGISTRATION NUMBER FROM LA | ABEL TO | DTAL PRODUCT USED | RATE 22 | DILUTION 23 | |
| | Makhteshim Agan of NA / | Parazone 3SL | | 130-AA | | 10 | l oz/a | 25 gal | |
| | Intergrated Agribusiness Professionals / Pro 90 7105 | | 71058- | 50002-AA | | 10 | l qt/a | 25 gal | |
| | | | | | | LB. 02. PT. 0T. GA. | | | |
| | | | | | | LB. OZ. PT. QT. GA. | | | |
| | | | | | | LB. OZ. PT. OT. GA. | | | |
| | | | | | | LB. OZ. PT. QT. GA. | | | |
| DAYS REENTR 24 hrs | | YS PREHARVEST 0 | APP <u>1</u> 26 | LIED/SUPERVISED BY | | | | | |

* Submit WHITE COPY to the COUNTY AGRICULTURAL COMMISSIONER within 7 days of application.

Distribution: Copy - Agricultural Commissioner; Applicator; Grower

Print Form

STATE OF CALIFORNIA

PRODUCTION AGRICULTURE MONTHLY PESTICIDE USE REPORT: MULTIPLE SITE/COMMODITY DPR-PML-183 (REV. 08/15) Page 1 of 2

DEPARTMENT OF PESTICIDE REGULATION PEST MANAGEMENT AND LICESNING BRANCH

SEE INSTRUCTIONS ON THE REVERSE OF THIS FORM

| 1. MONTH | chows on m | | 3, COUNTY NO, | | | | | | | | | | | |
|---|--|------------------------|---------------|-------------------------------------|----------------------------------|----------------------------------|--|---|--|-------------------------|-----------------|------------------------|--------------------|---------------------------|
| October | | 2016 | 54 | | | | | | | | | | | |
| 4. SECTION 5. TOW | VNSHIP 6. RANGE | 7. BASE & MERIDIAN | 8. OPERATOR I | D / PERMIT NO. | 9. OPERATOR (| GROWER) | | 10. ADDRESS | | 11. CITY | | | | 12. ZIP CODE |
| 10 16 | ⊇∾ ≍s 24 ⊇w | С Ж С ѕ м н | 5499999 | | Beta Pern | nitee | | 4437 S Laspina, ST A | | Tulare | | | | 93274 |
| 13. SITE IDENTIFICATION NUMBER | 14. DATE / TIME APPLICATION | 15. COMMODITY / SIT | E TREATED | 16. PRE-PLANT (IF APPLICABLE) | 17. TOTAL PLANTED ACRES | 18. TOTAL TREATED ACRES | 19, APPLICATION METHOD (CHECK ONE) | 20. EPA / CALIF. REG. NO. FROM LABEL | 21. TOTAL PRODUCT USED (CHECK ONE UNIT OF MEASURE) | 22. RATE PER ACRE | 23. DILUTION | 24. DAYS REENTRY | 25. MANUFACI | TURER / NAME OF PRODUCT |
| 01-101 | 10/1/2016 | Almond | | | 10 | 10 | GROUND AIR FUME OTHER | 524-549-AA | 180 | 18 | 25 gal | 4hr | Monsani PowerM | to / Roundup ax |
| 02-101 | 10/1/2016 | Almond | | | 15 | 15 | GROUND AIR FUME OTHER | 524-549-AA | 270 | 18 | 25 Gal | 4hr | Monsant PowerM | to / Roundup ax |
| 01-101 | 10/20/2016 | Almond | | | 10 | 10 | GROUND AIR FUME OTHER | 66222-130-AA | 10 IIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII | 1 | 25 ~~' | 1 | Makhtes Parazon | him Agan of NA / e 3SL |
| 02-101 | 10/21/2016 | Almond | | | 15 | 15 | GROUND | 66222-130-AA | 15 | 1 | 25 Col | 1 | Makhtes Parazon | him Agan of NA / e 3SL |
| | | | | | | | GROUND | | LB OZ PT QT GA | | | | | |
| | | | | | | | GROUND | | LB OZ PT QT GA | | | | | |
| | | | | | | | GROUND AIR FUME OTHER | | | | | | | |
| | | | | | | | GROUND AIR FUME OTHER | | LB OZ PT QT GA | | | | | |
| | | | | | | | GROUND | | LB OZ PT QT GA | | | | | |
| | | | | | | | | | LB OZ PT QT GA | | | | | |
| | REPORT PREPARED BY DATE PATE REVIEWED BY | | | | | | | | | | | | | |

Distribution: (1) CAC; (2,3) Applicator

SUBMIT TO AGRICULTURAL COMMISSIONER WITHIN 10 DAYS OF MONTH FOLLOWING APPLICATION

STATE OF CALIFORNIA DEPARTMENT OF PESTICIDE REGULATION DPR-PML-017C (REV. 08/15) Page 1 of 2

PRODUCTION AGRICULTURE MONTHLY PESTICIDE USE REPORT

Submit to the Agricultural Commissioner within 10 days of the month following application.

| October | 2016 |
|---------|-------------------|
| Month 1 | Year ² |

| Operator ID/Permit No. Operator (Grower) | | | Ado | Address | | City | | | Zip Code | |
|--|---------------------------------|--|-----------------------------------|--------------------------------|--|---|-----------------|------------------|-----------------|--|
| 5499999 Beta Permitee | | | 5 4 | 5 4437 S Laspina, St A | | 6 Tulare | | | , 93274 | |
| 3 4 | | | | County Number Section Township | | Range | | | Base & Meridian | |
| 8 01- | -101 | 9 | 10 | 10 54 | 11 10 12 | 16 🗌 N | × S 13 | 24 | ×Ε | W S ХМ Н |
| Commodity/Sit | te Treated | | | | Field Location | 1 - 21 - 51 - 51 - 61 - 61 - 61 - 61 - 61 - 6 | 110 | | | |
| 15 Almond | | | | | ₁₆ NA 400, WR 108 | | | | | |
| Date/Time Application 17 Completed | Acreage/ Units 18 Treated | Pre-plant (If Applicable) 19 | Application Method (Check One) | Block ID (If Applicable) | EPA or State Registration Number (From Label) | Total Product Used | Days Reentry | Rate Per Acre | Dilution | Product and Manufacturer |
| 10/1/2016 | 10 | | Ground Air Fume Other | | 524-549-AA | 180 | 4hr | 18 | 25 gal | Roundup PowerMax / Monsanto |
| 10/1/2016 | 10 | | Ground Air Fume Other | | 62719-447-ZA | 30 |] l day | 3 | 25 gal | GoalTender / Dow |
| 10/20/2016 | 10 | | Ground Air Fume Other | | 66222-130-AA | 10 |] l day | 1 | 25 gal | Parazone 3SL / Makhteshim Agan of NA |
| 10/20/2016 | 10 | | Ground Air Fume Other | | 71058-50002-AA | 10 |] N/A | 1 | 25 gal | Pro 90 / Integrated Agribusiness Professionals |
| | | | Ground Air Fume Other | | | | | | | |
| | | | Ground Air Fume Other | | | LB OZ PT QT G |] | | | |
| Report P | Prepared By | annahistana antara ang kasilana at Panjananahistan | | | Date | | Reviewed B | y | | |
| | | | | | | | | | For Agency | Use Only |

Distribution: (1) CAC; (2,3) Applicator

SUBMIT TO AGRICUTURAL COMMISSIONER WITHIN 10 DAYS OF MONTH FOLLOWING APPLICATION

STATE OF CALIFORNIA MONTHLY SUMMARY PESTICIDE USE REPORT

DPR-PML-060 (REV. 8/15) PAGE 1 OF 2

INSTRUCTIONS FOR COMPLETING THIS FORM ARE INDICATED BELOW AND ON THE REVERSE SIDE

| OPERATOR (FIRM NAME) | | ADDRESS | | CITY | | ZIP CODE | PHONE NUMBER |
|--------------------------------------|----------------|-----------------------|--------------------------------|---------------------|-----------------------|----------|------------------------------|
| Beta Permitee | | 4437 S Laspina, ST A, | | Tulare | | 93274 | 559-684-3352 |
| OPERATOR ID/PERMIT NUMBER 5499999 | LICENSE NUMBER | | COUNTY WHERE APPLIED Tulare | COUNTY NUMBER 54 | MONTH/YEAR 10/2016 | OF USE | TOTAL NUMBER OF APPLICATIONS |

1. Complete Columns A, B, C, and D for <u>All Users</u>

2. Complete Column E by using one of the following codes:

Code 10 - Structural Pest Control.....includes any pest control work performed within or on buildings and other structures.

Code 30 - Landscape Maintenance Pest Control.........includes any pest control work performed on landscape plantings around residences or other buildings, golf courses, parks, cemeteries, etc.

Code 40 - Right-of-Way Pest Control......includes any pest control work performed along roadsides, power lines, median strips, ditch banks, and similar sites.

Code 50 - Public Health Pest Control......includes any pest control work performed by or under contract with State or local public health or vector control agencies.

Code 70 - Marijuana.....includes any pest control for work performed on or around marijuana.

Code 80 - Vertebrate Pest Control.....includes any vertebrate pest control work performed by public agencies or work under the supervision of the State or county agricultural commissioner.

Code 91 - Commodity Fumigation (Nonfood/Nonfeed)....includes fumigation of nonfood/nonfeed commodities such as pallets, dunnage, furniture, burlap bags, etc.

Code 100 - Regulatory Pest Control......includes any pest control work performed by public employees or contractors in the control of regulated pests.

3. Complete Columns F and G, if use does not fit one of the above codes

| A | В | С | D | E | F | G |
|---|---|---|---------------------------|------|------------------------------|------------------------|
| MANUFACTURER AND NAME OF PRODUCT APPLIED | EPA/CALIFORNIA REGISTRATION NUMBER FROM LABEL INCLUDE ALPHA CODE | TOTAL PRODUCT USED (Check One Unit of Measure) | NUMBER OF APPLICATIONS | CODE | COMMODITY OR SITE TREATED | ACRES/UNITS TREATED |
| CDFA / .01% Diphacinone Bait | 10965-50003-ZA | 120 | 2 | 80 | | |
| Monsanto/ Roundup Power Max | 524-549-AA | 18 | 1 | 40 | | |
| | | LB OZ PT QT GA | | | | |
| | | LB OZ PT QT GA | | | | |
| | | LB OZ PT QT GA | | | | |
| | | LB OZ PT QT GA | | | | |

REPORT PREPARED BY

DATE

Print Form

Distribution: CAC - Two copies; Report preparer - One copy

Reminders

- NOI's are due at least 24 hours prior to the intended application
- Email NOI's to PUENOI@co.tulare.ca.us
- Monthly Ag PUR Summaries are due by the 10th of the following month.
- Pest Control Businesses PUR's are due within
 7 days of the application

Tulare County Agricultural Commissioner/Sealer

Marilyn Kinoshita, Agricultural Commissioner Sealer of Weights and Measures Tom Tucker, Assistant Agricultural Commissioner Sealer of Weights and Measures

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DATA REQUEST

Date of Request

In order to expedite this request, please fill in the required information. Be as thorough and as concise as possible.

Person making the request:

| Contact Person: | Phone: | |
|-----------------|------------|--|
| Company Name: | Fax: | |
| Address: | | |

Time frame: ie. "Current", "for the Year", "From – To":

Type of Data: ie. Grower list, Grower + Commodity, Grower + Location, Other:

Commodity(ies) if applicable:

Media format:

Printed

E-mail:

Signature of person making request

You will be contacted regarding cost and to confirm request information. Data will be sent as soon as payment is received.

bv

Request completed on

4437 S Laspina St • Tulare CA 93274 • Phone (559) 684-3352 • Fax (559) 713-3770

Data Request

- A printable form for requesting data that is Public Information, such as a list of growers who are producing a particular commodity in Tulare County.
- Please complete the form and email (<u>PUENOI@co.tulare.ca.us</u>) or fax (559-713-3770) it to the Tulare County Agricultural Commissioner.
- You will be contacted to confirm your request information and regarding any costs. Most permit information can be provided free of charge as an Excel spreadsheet via email.
- Phone numbers and emails are not considered Public Information and will not be provided

Helpful Links

- Agricultural Commissioner / Sealer Website: <u>http://agcomm.co.tulare.ca.us/default/</u>
- Department of Pesticide Regulation Fillable Pesticide Use Reports: <u>http://www.cdpr.ca.gov/docs/pur/forms/purforms.htm</u>