STATE OF CALIFORNIA
DEPARTMENT OF PESTICIDE REGULATION

NOTICE OF INTENT TO APPLY RESTRICTED MATERIALS

☐ Nursery

County No.	Section	Township	Range	Base & Meridian	App. Method	Permittee/Property Operator	Applicator Name and Address
		☐ N ☐ S	☐ E ☐ W	S ☐ M ☐ H ☐	Air ☐ Ground ☐ Other ☐		

Operator ID/Permit No.	Site Identification Number	Total Planted Acres/Units

Location	Block ID (If Applicable)

Date/Time Applied Proposed	Date/Time Applied Actual	Total Acres/Units Treated Proposed	Total Acres/Units Treated Actual	Commodity/Site Treated

Chem No	Manufacturer/Name of Product Applied	EPA/Calif. Registration No. From Label	Total Product Used	Rate	Dilution	Target Pest
		- - -	LB OZ PT QT GA			
		- - -	LB OZ PT QT GA			
		- - -	LB OZ PT QT GA			
		- - -	LB OZ PT QT GA			
		- - -	LB OZ PT QT GA			

Days Reentry	Days Preharvest	Applied/Supervised By

Environmental Changes/Comments

Submitted By	Date	Time	PCA Name

Received By	Box Number	Date	
			☐ Approved ☐ Denied

N
W Treatment Area E
S
Adjacent Crops, Schools, Dwellings, Etc.

Submit to AGRICULTURAL COMMISSIONER at least 24 hours before application.

PR-ENF-126X (Rev. 2/99)