Wisconsin Pesticide Application Recordkeeping Form for Private Applicators

This form combines recordkeeping information required for Restricted Use Pesticides (RUP) and the Worker Protection Standard (WPS).

Farm Name: ______

Date: * # MM/DD/YR Time: * # Start/Stop (AM/PM)	Crop or Site Treated * #	Mixing & Loading Site *	Location and Description of Treated Area * #	Wind Speed/ Direction/ Temp	Active Ingredient # Brand or Product Name * #	EPA Reg Number * #	# of Units or Acres *	Total Amount of Product (oz, pound, pint, quart, gallon) *	Applicator Name and Certification Number *	Restricted Entry Interval (REI)	
										Duration Hours: #	Expiration: MO/DA Time (AM/PM) #

*Required for RUP recordkeeping

#Required for WPS recordkeeping

In Wisconsin, private applicators must keep records of applications of *restricted use pesticides* for at least 2 years, 3 years for atrazine-containing pesticides.

Worker Protection requires that pesticide application information be posted for 30 days then retained for 2 years. Safety Data Sheets (SDS) must also be posted for 30 days and retained for 2 years. [40 CFR Part 170.311(b)(1-7)

Required Items	Restricted Use Pesticide Recordkeeping – Wisconsin	Agricultural Use Pesticides – Worker Protection Standard (WPS)
First and last name of applicator	\checkmark	
Crop, commodity or site treated	 ✓ 	\checkmark
Location and description of treated area	 ✓ 	\checkmark
Month, day, year of application	✓	\checkmark
Start and stop time of application	✓	\checkmark
EPA Registration number	✓	\checkmark
Product name	✓ (Or brand name or common chemical name)	\checkmark
Active Ingredient		\checkmark
Restricted Entry Interval (REI) duration		\checkmark
Concentration and total quantity of each pesticide applied or amount of product applied per unit area plus total area treated	~	
Mixing and loading site	\checkmark	