Pesticide Recordkeeping Form for Oklahoma Commercial and Non-commercial Applicators

Form Number Keep for 2 years

ODAFF Required Information	
Start & Stop Time of Application	
Total Amount of Pesticide Used	
Name of Applicator Company	
Company address	
Name, certification number, and certification expiration date of the certified	
applicator who made or supervised the application and name of the non-certified	
applicator under direct supervision, if any.	
Name of whom applied (Customer)	
Whom applied (Customer) address	
Legal Description where applied	
Date of Application	
Application Rate	
Dilution Rate for mixing	
Total quantity of pesticide tank mix used	
Complete Trade/Brand Name	
EPA Registration Number	
Adjuvants used if required by label	
Drift Reduction Agents used if required by label	
Target Pest for application	
Site where pesticide applied	
Size of the area treated (Acres/ft2)	
Restricted Entry Interval (REI)	
Copy of pesticide label	Attach to sheet
Copies of any contracts issued (Category 7B)	Attach to sheet
Copies of any wood infestation report WIR (Category 7B)	Attach to sheet
Optional Information	
Company License Number	
Wind Speed	
Wind Direction	
Temperature	
Application Volume GPA or GPft ²	
Tank Size	