



Integrated Pest Management Pesticide Use Form



*This form is to be completed by the
IPM Site Coordinator or PMP only*

Applicator and Location Information

Applicator Name: _____
First Middle Initial Last

Do you have a Utah pesticide application license? **Yes** **No** If yes, then: _____
Circle One UT Pesticide Application License #

Application Address: _____
Street Address City

Facility Name Location of Application

Application Date & Time: _____
Month Day Year Time

Pesticide Use Information

Total Amount Used (Dilution, or RTU)

Rate of Formulation Applied Per Unit Area
(Undiluted Pesticide Product as Sold by the Manufacturer, or RTU)
OR
Number of Devices Used (Bait Stations, etc.)

Site of Application (e.g., Structural Voids, Cracks and Crevices,
Baseboards, etc.) The label must list the application site of use.

Pest Information

Target Pest Type (e.g., Fly, Beetle, Wasp, Ants, Spider)

Specific Pest
(German Cockroach, Carpet Beetle, Hobo Spider, Pavement Ants, etc.)

Life Stage: Egg, Larva/Nymph, Pupa, Adult

Application Notes

Pesticide Label Information

Brand Name / Product Name

Active Ingredients

EPA Pesticide Registration Number(s)

Use One Form Per Application

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