

PESTICIDE USE PERMIT APPLICATION

Business / Entity Name: _____
 Date: _____

SUPPLEMENTAL SITE INFORMATION

Projected Date(s) of Pesticide Application: _____

Territory: Allegany Cattaraugus

County: _____

SNI Parcel ID Number: _____ Acres: _____

Description of Location / Field: _____

Land Owner: _____

Is the site within an area defined as habitat for species with Federal Protection Status? Yes No

State Protection Status? Yes No

Is the site located within an aquifer area? Yes No

Is there a waterbody located in a public water supply watershed? Yes No

If yes, where does the waterbody flow to? _____

Pesticide(s) Being Applied to this Parcel: _____

(including estimated quantity per acre) _____

Application Method(s): _____

Description of Mixing Process / Removal: _____

Projected Date(s) of Pesticide Application: _____

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Note: You can print as many copies of this form as needed to list every parcel that may have pesticides applied to it.