WASHINGTON STATE DEPT OF NATURAL RESOURCES

For DNR Region Office Use Only	
Region:	
Received Date:	

Forest Practices Chemical Application

VOLUNTARY SPRAY RECORD

1. Associated FPA Number.

2.

Legal Name of LANDOWNER:	Mailing Address:	City, State, Zip	Phone **( )** Email:
Legal Name of OPERATOR:	Mailing Address:	City, State, Zip	Phone **( )** Email:

3. Pesticide application information.

Unit Numbers	Acres Treated	Active Ingredient (If surfactant, enter surfactant type)	List EPA Numbers by Active Ingredient	Type (Herbicide, Fertilizer, etc.)	Quantity applied (Rate per acre of active ingredient)		Date Sprayed
					Pounds	Ounces	

4. Additional Units

Unit Numbers	Acres Treated	Active Ingredient (If surfactant, enter surfactant type)	List EPA Numbers by Active Ingredient	Type (Herbicide, Fertilizer, etc.)	Quantity applied (Rate per acre of active ingredient)		Date Sprayed
					Pounds	Ounces	

Attach additional pages as needed