Grow the Crop

Handout 12

Pre-Application Checklist

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Crop Protection Program Instructions:

Application Date	From:		To:	
Target Pest(s)/Disease(s)				
Chemical or CPPs				
PHI's				

	CPP	*Concentration*	*Per*
CPP Concentration			

Application Method	Stem Application		Soil Drench		Spray
Spray Type	Light Cover		Medium Cover		Full Cover
Other Instructions					

CPP Requirements:

CPP	*Quantity*	*Unit*	*Unit Quantity*	*Check*	
				Available	*Expiry*

Equipment Requirements:

Description	Quantity	Check	
		Available	Condition

Worker Requirements:

Description	Number	From	To

Other Requirements:

Notes:

Signed:		**Date:**	