Aquatic Plant Management Herbicide Treatment Record

Form 3200-111 (5/01)

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Notice: Completion of this form is a condition of the permit and provides records required by WDNR (NR 107) and DATCP (ATCP 29.21 and 29.22). The Department may not issue you future permits unless you complete and submit this form. Personally identifiable information required on this form is not likely to be used for purposes other than that for which it is originally being collected. It may also be made available to requesters under Wisconsin's Open Records law [ss. 19.31 - 19.39, Wis. Stats.]

Submit this form: (1) immediately if any unusual circumstances occurred during treatment (2) as soon after treatment as possible, no later than 30 days

(3) by October 1 if no treatment occurred Completion of this form along with the permit satisfies the requirements of WDNR (NR 107) and DATCP (ATCP 29.21 and 29.22). **General Permit Information** Waterbody Name (including ponds, e.g., Smith Pond) Long Trade County Round Trade Treatment Information Starting Time (24 hr) Ending Time (24 hr) Water Temp (°C) Wind Direction 58°4 Other Conditions Noted (i.e., dead fish, spawning fish, algae bloom, etc.) Along f Yes, Supervisor Name Onsite Supervision Present? Mixing and Loading Site Location (if other than business site or from prepackaged retail container or applied with equipment with a total capacity of not more than 5 gallons liquid or 50 pounds dry) 5,1, Herbicide Treatment and Water Use Restrictions Signs Posted In Accordance With NR 107? X Yes Applicator shall provide each customer with a free copy of each pesticide label used (if requested) **Applicator Information** Individual or Business Name Telephone Number State ZIP Code 54009 Certification # Individuals Making Pesticide Application: 06/742 Last Name Certification # Last Name First Certification # Signature Date Signed Name of Person Completing Form 6/6/2013