Merced County Agricultural Commissioner's Office
Metam Sodium and Metam Potassium
Application Method 7A
Permit Conditions for Pre-plant Applications to Sweet Potatoes

Introduction

These permit conditions were developed to mitigate hazards of offsite movement of methyl isothiocyanate following applications of metam sodium and metam potassium to application blocks where sweet potatoes will be grown in Merced County.

These permit condition requirements are coordinated with, but are not part of, the volatile organic compound regulations in Title 3, California Code of Regulations (3 CCR) sections 6450 through 6450.2.

CAC discretion

1. The CAC have the discretion to use mitigating conditions based on the local use conditions that have worked for them in the past.
2. Any notice of intent for application in sensitive areas is subject to denial or the requirement of post-application water treatments (according to method 7) based on: the number and location of sensitive sites, weather conditions and forecast, geographical features of the application site, or any other factor which may impact the safe application of the material.
3. The permit conditions are based on the fairly limited data that DPR has available. It does not cover all environmental conditions, climates, soil types, etc.

Prohibited fumigations near schools, day care centers, and preschools

All applications are prohibited within ½ mile of a school property when school is in session or is scheduled to be in session within 36 hours of the completion of the application.

Accident response

1. All employees involved in an application or post-application water treatment must receive annual training in accident response procedures.
2. Employers must keep a record of employee training for a period of 2 years.

Permit application

Permit applications must include a map or description of all occupied structures and bystander areas within ½ mile of the fumigation site and all schools within 1 mile of the fumigation site.

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Permit Conditions for
Pre-plant Applications to Sweet Potatoes
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California Fumigant Management Plan (CA FMP)

For all applications the operator of the property must:

1. Provide a copy of the CA FMP to the pest control business applying metam sodium and metam potassium.
2. Have the CA FMP available at the work site while the application and post application work activities are performed.

See appendix II for the CA FMP.

Notice of Intent

1. The Notice of Intent (NOI) is required to be submitted at least 48 hours prior to fumigation.
2. In addition to information required in 3 CCR section 6434(b), the following information must be submitted with the NOI:
   - The acreage of each application block.
   - The time (within a 4-hour window) that each application is scheduled to commence. Once the 4-hour window closes a new NOI is required, but another 48-hour waiting period would not be needed unless required by the CAC.
   - The buffer zone size.
   - The certified applicator's 24-hour contact telephone number.
   - Documentation of agreement to allow a buffer zone to extend to the adjoining agricultural property, if applicable.
   - Documentation of the agreement to allow a buffer to extend into the property of an occupied structure, if applicable.

Application timing

Metam sodium and metam potassium shank applications must start no earlier than 1 hour after sunrise and must be completed no later than 1 hour before sunset.

Buffer zones

1. **Table**
   - Use Table 1 to determine the buffer zone distance.
   - If the table does not capture the specific acreage or application rate, round up to the nearest acre or rate.
   - If the buffer zone required by the permit conditions and the label conflict, use the longest of the two buffer zones.
2. **Onsite measurement**
   - The buffer zone is measured from the perimeter of the application block to the perimeter of an occupied structure or bystander area property line.

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Permit Conditions for
Pre-plant Applications to Sweet Potatoes
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Buffer Zone (continued)

3. **Restrictions**
   - The following restrictions apply from the start of the application until the expiration of the buffer zone:
     i. Buffer zones are in effect at the start of the application.
     ii. Buffer zones shall not contain occupied structures.
     iii. The operator of the property shall assure that no persons are allowed in a buffer zone except to transit, perform fumigation handling activities and commissioner-approved activities.
     iv. Buffer zones shall not extend into properties of occupied structures or bystander areas.
     v. Buffer zones shall not extend into adjoining agricultural properties.
     vi. The CAC may approve buffer zones that extend across transit sites (streets, highways, etc.).
4. **Exemptions**
   - If advanced permission is obtained from the property owner, operator, or legal resident, the buffer may encroach onto the property of an occupied structure up to a clearly specified boundary. Documentation of this agreement must be submitted with the NOI.
   - When an application requires the buffer zone to extend into an adjoining agricultural property, an agreement must be obtained. The operator of the property to be treated must document how the operator of the adjoining property will ensure workers will not enter the buffer zone. Documentation of this agreement must be submitted with the NOI.
5. **Duration**
   - Buffer zones remain in effect for **48 hours** after the completion of metam sodium or metam potassium applications.
6. **Multiple Block Applications**
   - Multiple block applications (application blocks of an individual operator of the property that are less than ¼ mile apart and are treated consecutively over a 2-day period) are prohibited. Forty-eight hours must elapse between applications less than ¼ mile apart.

Monitoring requirements

1. **General Requirements**
   - Monitoring information must be recorded on the CA FMP required by new federal labels.
   - If monitoring indicates a change that could result in offsite movement (e.g. increased or greatly decreased wind speed, change in wind direction toward occupied structures) the grower or applicator should be ready to take whatever action is necessary to prevent or reduce offsite movement. This would include postponing or stopping an application and/or immediately begin additional compaction of the treated soil.
   - Monitoring records must be maintained for 2 years

Continued on next page

Permit Conditions for
Pre-plant Applications to Sweet Potatoes
Continued

Monitoring requirements (continued)

2. **Pre-application**
   - The following conditions must be met and recorded immediately prior to the application:
     i. Monitor and document wind speed and direction, soil temperature, moisture content, and air temperature at the application site.
     ii. Applications may only begin if:
       (1) Soil temperature at the depth of the highest injection point is less than 65 degrees F.
       (2) Soil moisture at the depth of application meets the following criteria:
         a) Coarse soils (sand and loamy sand), at least enough moisture to form a ball when compressed by hand that may break when tapped;
         b) Loamy, moderately coarse or medium textured (coarse sandy loam, sandy loam, fine sandy loam) at least enough moisture to form a ball that holds together when tapped;
         c) Fine texture soils (clay loam, silty clay loam, sandy clay, silty clay, sandy clay loam and clay), at least enough moisture that soil is pliable, not crumbly.
       (3) Soil texture is 70% or more sand, and the soil is tilled to a fine texture with no clods that are greater than ½ inch in diameter.
       (4) There is no fog present or forecast for 24 hours.
       (5) Wind speed is at or below 15 mph, and forecasted to be at or below 15 mph at the time of application and for 24 hours after application.
       (6) Forecasted weather conditions will be obtained from the following NOAA website: http://www.nws.noaa.gov/
3. **Application**
   - The operator of the property or a trained employee must be present during the application.
   - The following application conditions must be monitored and recorded during the application:
     i. Wind speed and wind direction must be monitored **every hour** until the application is completed.
     ii. Any unusual conditions (e.g. odor, reported illness, equipment failure or spill) observed at the work site.
4. **Post-application**
   - On the day of application, the operator of the property or a trained employee must be at the site continually from 1 hour before sunset through 1 hour after sunset, in addition to the periods required to conduct post-application monitoring. If an employee is present at the site, the employee must be able to immediately contact the operator of the property or have authority to respond in case any unusual conditions occur.

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Permit Conditions for Pre-plant Applications to Sweet Potatoes
Continued

Monitoring requirements (continued)

- Post-application field monitoring shall be conducted for 12 hours following application. Monitoring must occur every hour.
- The following post-application conditions must be monitored and recorded at the appropriate intervals:
  i. Wind speed and direction at the application site.
  ii. Air temperature at the application site.
  iii. Any unusual conditions observed at the worksite (e.g. dry soil conditions or odor).
  iv. The grower and pest control business need to follow the requirements in the CA FMP if the unusual condition(s) could result in off-site movement of MITC.

Application method requirements

1. All applications must be made by a licensed pest control business; the business must have a person holding a qualified applicator license or certificate with the field fumigation pest control subcategory supervising the work.
2. Maximum application rate is 260 pounds active ingredient/acre.
3. The following general requirements apply to all shank applications of metam sodium and metam potassium:
   - All equipment must be inspected prior to use to assure it is in good working condition.
   - The shanks and injector orifices must be below the soil surface before flow begins, and prior to removing them from the soil, the flow must be terminated.
   - Application block size is limited to a maximum of 30 acres within a 48-hour period when application blocks are within ¼ mile of each other, or when made within ½ - 1 mile from the perimeter of school property (when the school is in session or scheduled to be in session while the buffer zone is in effect).
   - Before application, thoroughly cultivate the field with a disc or spring tooth bar to remove clods larger than ½".
   - The application equipment must meet the following specific criteria:
     i. The shanks must be set on three bars spaced 9-16 inches apart from front to back.
     ii. The shanks must be staggered on each tool bar to produce a final overall shank spacing of 9-11 inches.
     iii. Injection depth is a minimum of four inches.
     iv. The application tool bars must be immediately followed by a bar at least the width of the application tool bars to help close shank traces.
     v. Anytime the shanks are lifted from the ground, nitrogen must be used to purge the system before the application bar is lifted out of the ground.

Continued on next page

Permit Conditions for
Pre-plant Applications to Sweet Potatoes
Continued

Application method requirements (continued)

vi. Compaction equipment must meet one of the following criterion:
   (1) The application tool bars must be followed by a ring roller that is at least as wide as the application tool bars, with 2 or 4 gauge wheels controlled by hydraulic cylinders to control depth and/or pressure. **OR**
   (2) The application tool bars must be followed with a coil packer that is at least as wide as the application tool bars.

vii. Compaction equipment must be available for re-sealing of the surface for 24-hours after completion of the application.

4. Maximum application rates up to 300 pounds active ingredient to sites may be approved based on evaluation of the following criteria by the Agricultural Commissioner:
   i. Documented unusually high pest pressure
   ii. Soil temperatures below 60 degrees.
   iii. Soil moisture is at least 70% of field capacity.
   iv. Site is greater than one mile from any occupied structure
   v. Application is limited to a maximum of 15 acres.

Table 1.
Metam Sodium and Metam Potassium Buffer Zone Values for Shank Applications In Merced County

Acres Treated	Buffer Zones (feet) Application Rate[1] (lbs active ingredient per acre)													
	300	280	260	240	220	200	180	160	140	120	100	80	60	40
1	100	100	100	100	100	100	100	100	100	100	100	100	100	100
5	100	100	100	100	100	100	100	100	100	100	100	100	100	100
10	200	150	150	100	100	100	100	100	100	100	100	100	100	100
15	250	200	150	100	100	100	100	100	100	100	100	100	100	100
20	350	300	250	200	200	150	150	100	100	100	100	100	100	100
25	450	350	300	200	200	150	150	100	100	100	100	100	100	100
30	450	350	300	200	200	150	150	100	100	100	100	100	100	100

[1]Application rates are expressed for broadcast applications, and were calculated for metam sodium applications. To determine buffer zones for metam potassium applications, multiply the buffer zone distance listed by 0.9. A minimum 100ft. buffer zone must be maintained for all applications.

APPENDIX I

Definitions

Application: Activities required to incorporate metam sodium, metam potassium or dazomet into the prepared soil. Applying additional water to the treated soil in order to suppress off-site movement of MITC is not part of the application process.

Bystander Area: An area used or visited by people on a daily basis, including parks, playgrounds, lakes, reservoirs, bus stops, and other similar areas where groups of people visit, or other areas identified by the CAC.

Drench Application: Application is made to pre-formed beds or to rows, using low-pressure (30 – 35 pounds per square inch) booms with nozzles <12 inches above the top of the beds.

MITC: Methyl isothiocyanate. Metam sodium, metam potassium, and dazomet break down into a number of compounds. MITC is one of the breakdown compounds.

Occupied Structure: A home or other building that may be occupied at any time during a 24-hour period. This includes living and working areas that are associated with the occupied structure (e.g. yard, garden). Homes occupied by the property owner or permittee are excluded from this definition.

Ozone Nonattainment Area: An area designated in Title 40, Code of Federal Regulations section 81.305 for the purpose of air quality planning within the chart titled "California – Ozone (1-Hour Standard)".

Rod Bar Application: Backward-facing hollow tube (rod) attached to a metal blade-like horizontal bar. The rod bar is designed to operate under the surface of pre-formed beds, dispersing metam through holes spaced ½ - 1 inch linearly along the entire length of the bar. The application is immediately followed by a bed shaper or solid press rollers that compact the soil over the treated area.

Rotary Tiller Application: Metam is sprayed on or injected under the soil surface immediately in front of a power driven tiller. The treated soil is tilled with untreated soil at a depth set to where control is desired and immediately compressed with a soil-compacting device.

School: An institution for the instruction of children from kindergarten through high school. Also included are day care centers and preschools, as defined in the Health and Safety Code section 1596.76. *"Day care center" means any child day care facility other than a family day care home, and includes infant centers, preschools, extended day care facilities, and schoolage child care centers.* This excludes family home day care. (Users can find day care centers in their area by going to the following website: https://secure.dss.cahwnet.gov/ccld/securenet/ccld_search/ccld_search.aspx. Search on "child care center" as the facility type and then search on ZIP code, city, county or area code to find the names and addresses of the child care centers in a specific area.)

Sensitive Area: An area where the application block is ¼ mile or less from occupied structures (e.g., residences, employee housing, businesses, schools, convalescent homes, hospitals), bystander areas, and other similar sites determined by the CAC.

Soil Capping Application: Following a metam sodium or metam potassium band treatment, a minimum of 6 inches of untreated soil is placed over the band.

Spray Blade Application: An 8 - 14 inch horizontal "V"-shaped blade designed to operate under the soil surface with one or two backward-facing spray nozzles placed under the leading edge. The blade is placed 1 - 4 inches below the soil surface and the resulting subsurface band is further covered with disk-hillers immediately following to form a minimum 6-inch protective cap over the treated band.

Standard Area: An area where the application block is greater than ¼ mile away from occupied structures (e.g., residences, employee housing, businesses, schools, convalescent homes, hospitals), bystander areas, and other similar sites determined by the CAC.

APPENDIX II

Fumigant Management Plan (FMP) – See following pages

STATE OF CALIFORNIA

FUMIGANT MANAGEMENT PLAN (FIELD FUMIGATION)

DPR-ENF-220 (NEW 12-10) PAGE 1

DEPARTMENT OF PESTICIDE REGULATION
ENFORCEMENT BRANCH

PAGE _____ OF _____

A. Supervising Certified Applicator On-Site

NAME	INDIVIDUAL LICENSE NUMBER	GROWER EMPLOYEE CERTIFICATE NUMBER
PEST CONTROL BUSINESS NAME	PEST CONTROL BUSINESS LICENSE NUMBER	CONTACT INFORMATION ON PERMIT / NOI? ☐ YES

B. Operator of the Property

NAME	PERMIT NUMBER	CONTACT INFORMATION IN PERMIT / NOI? ☐ YES

C. General Application Information

PRODUCT NAME	U.S. EPA REGISTRATION NUMBER	TARGET DATE	WINDOW

SITE IDENTIFICATION NUMBER	BLOCK NUMBER	MAP AND SITE INFORMATION ON PERMIT? ☐ YES

APPLICATION METHOD *(Mark as applicable)*

☐ FLOOD ☐ SPRINKLER* ☐ SPRAY BLADE DEPTH *(Inches)* _____ ☐ DRIP DEPTH *(Inches)* _____

☐ DRENCH ☐ SHANK DEPTH *(Inches)* _____ ☐ ROTARY TILL DEPTH *(Inches)* _____ ☐ OTHER *(Specify)* _____

*SPRINKLER

WATER PRESSURE *(Pounds per square inch)*	NOZZLE SIZE	LENGTH / LINE	IRRIGATION RATE *(Inches / hr.)*

IRRIGATION SET NUMBER	LINES / SET	ACRES TREATED / SET

TREATMENT TYPE *(Mark as applicable)*

☐ BROADCAST *(Entire field)* ☐ ROWS *(Flat fume)* ☐ STRIP

☐ RAISED BEDS ☐ TREE HOLES ☐ OTHER _____

FUMIGANT CONTAINMENT *(Mark as applicable)*

☐ COMPACTION ☐ TARP ☐ OTHER _____

☐ SOIL CAP ☐ WATER *(Attach post-application water treatment table)*

SOIL COMPACTION *(Mark as applicable)*

☐ DISC & ROLLER ☐ DRAG PIPE ☐ PRESS SEALER

☐ SHOVELS & ROLLER ☐ CULTIPACKER & DISC ☐ OTHER _____

WHEN SENSORY IRRITATION IS EXPERIENCED, OPERATIONS

☐ WILL: CEASE; PERSONNEL WILL BE WITHDRAWN FROM THE SITE

☐ CONTINUE WITH HANDLERS WEARING AIR-PURIFYING RESPIRATORS

WHEN NECESSARY, AIR MONITORING WILL BE PERFORMED BY _____ *(Address and telephone number available on file)*

WHEN NECESSARY, THE FOLLOWING REPRESENTATIVE HANDLER TASKS WILL BE MONITORED

THE FOLLOWING MONITORING EQUIPMENT WILL BE USED

THE TIMING OF THE MONITORING THAT WILL BE PERFORMED IS AS FOLLOWS

D. Tarps Used ☐ YES ☐ NO

TARP TYPE *(Mark as applicable)*

☐ HIGH BARRIER ☐ TOTALLY IMPERMEABLE (TIF) ☐ VIRTUALLY IMPERMEABLE (VIF) ☐ SEMI-VIRTUALLY IMPERMEABLE (SIF)

☐ HIGH-DENSITY POLYETHYLENE (HDPE) ☐ OTHER (Specify) _____

LOT NUMBER	THICKNESS	TARP CHECK SCHEDULE

TARP REPAIRS BY	RESPONSE TIME

MINIMUM SIZE TO BE REPAIRED	MINIMUM TIME AFTER APPLICATION TARPS WILL BE REPAIRED

FUMIGANT MANAGEMENT PLAN
(FIELD FUMIGATION)

D. Tarps Used (Continued)

FACTORS THAT DETERMINE WHEN TARP WILL BE REPAIRED

PERSON RESPONSIBLE FOR CUTTING TARPS	TELEPHONE NUMBER *(Include Area Code)*	PERSON RESPONSIBLE FOR REPAIRING TARPS	TELEPHONE NUMBER *(Include Area Code)*
TARP CUTTING METHOD	**CUTTING SCHEDULE / TARGET DATE**	**TARP REMOVAL METHOD**	**REMOVAL SCHEDULE / TARGET DATE**

E. Weather Conditions (Immediately prior to application)

WIND SPEED (MPH)	WIND DIRECTION	AIR TEMP. (°F)	COPY OF WEATHER FORECAST FOR THE DAY OF APPLICATION AND 48 HOURS AFTER APPLICATION (INCLUDING INVERSION CONDITIONS AND ANY AIR STAGNATION ADVISORY) ATTACHED
			☐ YES

F. Soil Conditions (Immediately prior to application)

SOIL MOISTURE / DEPTH	SOIL MOISTURE METHOD USED	SOIL TEXTURE	SOIL TEMPERATURE °F / DEPTH

G. Respiratory Program -- Written Respiratory Program Document on File ☐ YES

H. Posting

PERSON POSTING SIGNS	POSTING WILL CONFORM TO 3 CCR SECTION 6776
	☐ YES

I. Hazard Communication

ON-SITE COMMUNICATION AND HAZARD COMMUNICATION WILL CONFORM TO 3 CCR SECTIONS 6618, 6619, 6723, AND 6723.1 AND THIS FUMIGATION PLAN	MSDS FOR ALL PESTICIDES APPLIED WILL BE AVAILABLE ON-
☐ YES	☐ SITE YES

J. Other Good Agricultural Practices

DESCRIPTION OF ALL OTHER APPLICABLE GOOD AGRICULTURAL PRACTICES (GAP)

DESCRIPTION OF MEASUREMENTS AND DOCUMENTATION ENSURING THAT GAPS ARE ACHIEVED

FUMIGANT MANAGEMENT PLAN
(FIELD FUMIGATION)

K. Emergency Procedures

"IN CASE OF EMERGENCY" CONTACT (NAMES AND TELEPHONE NUMBERS, *Include Area Code*)

☐ 9-1-1 ☐ OPERATOR _____ ☐ CERTIFIED APPLICATOR _____

☐ CAC _____ ☐ OTHER _____

ON-SITE TELEPHONE LOCATION

EVACUATION ROUTES

EMERGENCY PROCEDURES

L. Attachments (List ALL Attachments)

MINIMUM REQUIRED --

☐ AUTHORIZED ON-SITE PERSONNEL ☐ WEATHER FORECAST ☐ POST-APPLICATION SUMMARY

OTHER

I verify that the information provided in this Fumigant Management Plan and its attachments accurately reflect the actual conditions associated with this application. I certify that I will maintain this record and make it available for inspection for two years from the date of the application.

SIGNATURE OF CERTIFIED APPLICATOR SUPERVISING APPLICATION

DATE

STATE OF CALIFORNIA

AUTHORIZED ON-SITE PERSONNEL (FIELD FUMIGATION)

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DEPARTMENT OF PESTICIDE REGULATION
ENFORCEMENT BRANCH

ATTACHMENT # _____

-- Attach to Fumigant Management Plan --

PAGE _____ OF _____

☐ ADDRESSES AND TELEPHONE NUMBERS OF HANDLERS AND EMPLOYERS AVAILABLE ON FILE

☐ TRAINING RECORDS FOR HANDLERS AVAILABLE ON FILE

☐ HANDLER RESPIRATORY INFORMATION AND QUALIFICATIONS AVAILABLE ON FILE

AUTHORIZED ON-SITE PERSONNEL

HANDLER NAME	TASKS	PPE	EMPLOYER

PPE CODE (EXAMPLE)

1. Long-sleeved shirt, long pants, shoes, socks, TC-23C full-face respirator with OV cartridge and prefilter when triggered.
2. Long-sleeved shirt, long pants, CR shoes, socks, CR gloves, CR apron, safety glasses, TC-23C full-face respirator with OV cartridge and prefilter when triggered.

STATE OF CALIFORNIA

AIR MONITORING
(FIELD FUMIGATION)

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DEPARTMENT OF PESTICIDE REGULATION
ENFORCEMENT BRANCH

ATTACHMENT # ______

-- Attach to Post-Application Summary --

PAGE ______ OF ______

SITE IDENTIFICATION NUMBER	BLOCK NUMBER
DATE	MONITORING METHOD

TIME	LOCATION	NAME OF PERSON MONITORING	READING

STATE OF CALIFORNIA

MONITORING DURING APPLICATION (FIELD FUMIGATION)

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DEPARTMENT OF PESTICIDE REGULATION
ENFORCEMENT BRANCH

ATTACHMENT # _____

-- Attach to Post-Application Summary --

PAGE _____ OF _____

HOUR	TIME	WIND SPEED *(MILES PER HOUR)*	WIND DIRECTION *(FROM)*
START			
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
END			

NOTE: Record the time, wind speed and direction when fumigant is first applied to the site in the **START** Row. Monitoring is required **every hour** until the application is completed. Record the time, wind speed and direction when the fumigant application stops in the **END** row.

COMMENTS / OBSERVATIONS

STATE OF CALIFORNIA

MONITORING POST-APPLICATION (FIELD FUMIGATION)

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DEPARTMENT OF PESTICIDE REGULATION
ENFORCEMENT BRANCH

ATTACHMENT # _____

-- Attach to Post-Application Summary --

PAGE _____ OF _____

HOUR	TIME	AIR TEMP (°F)	WIND SPEED *(MILES PER HOUR)*	WIND DIRECTION *(FROM)*
1 hour before sunset				
At sunset				
1 hour post application				
2 hours post application				
3 hours post application				
4 hours post application				
5 hours post application				
6 hours post application				
7 hour post application				
8 hours post application				
9 hours post application				
10 hours post application				
11 hours post application				
12 hours post application				

NOTE: Monitoring is required for a 12-hour period after application. Monitoring is required **every hour** for sensitive areas and within 1 mile of a school property when school is in session (or scheduled to be in session while the buffer zone is in effect). Otherwise, monitoring is required **every two hours**.

COMMENTS / OBSERVATIONS

STATE OF CALIFORNIA

POST-APPLICATION WATER TREATMENTS (FIELD FUMIGATION)

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DEPARTMENT OF PESTICIDE REGULATION
ENFORCEMENT BRANCH

ATTACHMENT # _____

-- Attach to Post-Application Summary --

PAGE _____ OF _____

NUMBER OF WATER TREATMENTS	DATE / TIME STARTED	DATE / TIME COMPLETED	INCHES OF WATER / HOUR
1			
2			
3			
4			
5			

COMMENTS / OBSERVATIONS

STATE OF CALIFORNIA

POST-APPLICATION SUMMARY (FIELD FUMIGATION)

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DEPARTMENT OF PESTICIDE REGULATION
ENFORCEMENT BRANCH

ATTACHMENT # _____

-- Attach to Fumigant Management Plan --

PAGE _____ OF _____

A. Application

DATE OF APPLICATION	PERMIT NUMBER	SITE IDENTIFICATION NUMBER
FIELD LOCATION / BLOCK NUMBER	**PROPOSED TREATED ACRES**	**TOTAL TREATED ACRES / RATE**

SUMMARY OF WEATHER CONDITIONS ON THE DAY OF THE APPLICATION AND DURING THE 48-HOUR PERIOD FOLLOWING THE APPLICATION

B. Tarp Perforation / Removal - Tarp Used ☐ YES ☐ NO

COMPLETE THE FOLLOWING IF DIFFERENT FROM THE FUMIGANT MANAGEMENT PLAN:

PERSON RESPONSIBLE FOR CUTTING TARP	TELEPHONE NUMBER *(Include Area Code)*	TARP CUTTING METHOD	DATE OF TARP CUTTING

Tarp Repair ☐ YES ☐ NO

LOCATION AND SIZE OF TARP DAMAGE	DATE AND TIME OF TARP REPAIR(S)

DESCRIPTION OF ANY TARP / TARP SEAL / TARP EQUIPMENT FAILURE

TARP REMOVAL METHOD	TARP REMOVED BY	DATE OF TARP REMOVAL

C. Elevated Air Concentrations Measured ☐ YES ☐ NO

LOCATION OF ELEVATED AIR CONCENTRATION LEVELS

SENSORY IRRITATION EXPERIENCED ☐ YES ☐ NO	HANDLER TASK / ACTIVITY	DATE AND TIME
LOCATION WHERE IRRITATION EXPERIENCED	**ACTION TAKEN**	
DIRECT-READ INSTRUMENT ☐ YES *(Type used)*_____ ☐ NO	**HANDLER TASK / ACTIVITY**	**DATE AND TIME**
HANDLER LOCATION	**AIR CONCENTRATION**	

D. Posting

DATE OF TREATED AREA SIGN REMOVAL	SIGNS REMOVED BY

E. Deviations from the Fumigation Management Plan ☐ YES ☐ NO

PROVIDE DESCRIPTION OF ANY DEVIATIONS

POST-APPLICATION SUMMARY (FIELD FUMIGATION)

ATTACHMENT # _____

-- Attach to Fumigant Management Plan --

F. Incidents ☐ YES ☐ NO

DESCRIPTION OF INCIDENTS, EQUIPMENT FAILURE, OR OTHER EMERGENCY AND RESPONSE

G. Complaints - Complaints Received ☐ YES ☐ NO

TYPE OF PERSON FILING COMPLAINT *(e.g., On-site handler, bystander)*	NAME *(If bystander)*

BYSTANDER'S ADDRESS *(Number and Street, City, State, ZIP Code)*	BYSTANDER'S TELEPHONE NUMBER *(Include Area Code)*

DESCRIPTION OF CONTROL MEASURES OR EMERGENCY PROCEDURES TAKEN *(Continued)*

H. Attachments (List ALL Attachments)

☐ POST-APPLICATION WATER TREATMENTS ☐ MONITORING DURING APPLICATION ☐ MONITORING POST-APPLICATION ☐ AIR MONITORING

OTHER

I verify that the information provided in this Fumigant Management Plan and its attachments accurately reflect the actual conditions associated with this application. I certify that I will maintain this record and make it available for inspection for two years from the date of the application.

SIGNATURE OF CERTIFIED APPLICATOR SUPERVISING APPLICATION

DATE