COUNTY OF SAN DIEGO

PESTICIDE USE MONITORING INSPECTION

DEPARTMENT OF AGRICULTURE, WEIGHTS AND MEASURES
PESTICIDE REGULATION PROGRAM

PAGE ____ OF _____

FIRM/PERSON INSPECTED	SUPERVISOR	PCA RECOMMENDATION	WIND VELOCITY/ DIRECTION TO
FIRM ADDRESS	TELEPHONE	PERMIT/OPERATOR ID NUMBER	COMMODITY/SITE
IF PCO APPLIED, NAME OF BUSINESS WHERE APPLIED: PROPERTY LOCATION/SITE NO	BUSINESS TYPE NUMBER [ ] Property Operator (grower, govt agency) [ ] Pest Control Business (agricultural, gardener) [ ] Agricultural Production [ ] Non Production		EQUIPMENT USED:
ADJACENT ENVIRONMENT (N) (S) (E) (W)			TIME START STOP

HANDLER'S NAME # OF HANDLERS _____	ACTIVITY	PERSONAL PROTECTIVE EQUIPMENT (PPE) PROVIDED/WORN	Label	PPE REQ'D, NOT WORN
	App M/L Other:	Coveralls P W Eyewear P W Gloves P W Resp P W Other: P W		
	App M/L Other:	Coveralls P W Eyewear P W Gloves P W Resp P W Other: P W		
	App M/L Other:	Coveralls P W Eyewear P W Gloves P W Resp P W Other: P W		
	App M/L Other:	Coveralls P W Eyewear P W Gloves P W Resp P W Other: P W		
	App M/L Other:	Coveralls P W Eyewear P W Gloves P W Resp P W Other: P W		

PESTICIDE NAME/MANUFACTURER	LABEL REGISTRATION NUMBER	SIGNAL WORD	FORMULATION	RATE	DILUTION	REI
1.		Danger Warning Caution	F L WP			
2.		Danger Warning Caution	F L WP			
3.		Danger Warning Caution	F L WP			
4.		Danger Warning Caution	F L WP			
5.		Danger Warning Caution	F L WP			

A. APPLICATION INSPECTION / B. MIX AND LOAD INSPECTION

COMPLIANCE Yes	No	NA	REQUIREMENTS	Reference Section	COMPLIANCE Yes	No	NA
			1. Complies with Permit Conditions	12973			
			2. Labeling - Site/Rate/Other*	12973			
			3a. Labeling - Coveralls*	12973			
			b. Labeling - Eyewear*	12973			
			b. Labeling - Gloves*	12973			
			c. Labeling - Respirator*	12973			
			d. Labeling - Other:*	12973			
			4. Restricted Material Use Supervised	6406			
			5. Notice of Intent Submitted	6434			
			6. Drift Control/Phenoxy Herbicides	6460,64			
			7. Suitable Methods/Manner/Climate	6600			
			8. Registered Label Available at Use Site	6602			
			9. Accurate Measurement	6604			
			10. Protection of Persons/Animals/Property	6614			
			11. Containers Secured & Under Control	6670			
			12. Containers Properly Rinsed	6684			
			13. Handlers Trained	6724			
			14. Medical Care Posted Informed	6726			
			15. Employee Contact (Working along, Cat I, Prod)	6730			
			16. Decontamination Facilities (Production, all Cat)	6734(a,b)			
			Coveralls Water Soap Towels				
			Decontamination Facilities (NonProd,Cat I, II)	6734(a,d)			
			17. Eyewash Immediately Available (Prod/Label)	6734(c)			
			18. Coveralls, Signal Word Danger or Warning	6736			
			19a. Regulations - PPE provided	6738(a)			
			b. Regulations-Eyewear	6738(b)			
			c. Regulation- Gloves	6738(c)			
			d. Regulation-Footwear	6738(d)			
			e. Regulation-Headgear	6738(e)			
			f. Regulation- Apron	6738(f)			
			g. Regulation-Chemical Resistant Suit	6738(g)			
			h. Regulation-Respiratory Protection	6738(h)			
			20. Closed System – Meets Criteria	6746			
			21. Warning Signs Posted	6776			
			22a. PCB Licensed / Work for Hire	11701			
			b. PCB Registered in County	11732			

C. EQUIPMENT INSPECTION

REQUIREMENTS	Reference Section	COMPLIANCE Yes	No	NA
1. Equipment Registered	11732			
2. Equipment Identified	6630			
3. Equipment Safe to Operate	6600(a)			
4. Backflow Prevention Airgap Provided Used	6610			
Safe Equipment				
5. Proper Tank Cover	6742			
6. Shut Off Device/Sight Gauge-Cat I, II	6742			
7. Service Containers Labeled	6678			
8. Container Transportation	6682			

Are Handlers employees? [ ] Yes [ ] No How do you know?
*Write Label Requirements in Remarks.

REPORTS

Follow-up Required	[ ] Yes [ ] No
Cease & Desist Order Issued Food & Ag Code 11897 13102	[ ] Yes [ ] No
Stop Work Order Food & Ag Code 11737	[ ] Yes [ ] No

☐ For any NO marked under "Compliances", this inspection form serves as a

Violation Notice

[ ] Must be corrected before next application, but no later than _____

[ ] Contact Inspector _____ at _____ for reinspection before above date.

Noncompliances corrected at time of inspection:

REMARKS:

INSPECTOR'S SIGNATURE	NUMBER	DATE INSPECTED
INSPECTION ACKNOWLEDGED BY PRINT SIGNATURE	TITLE	DATE ACKNOWLEDGED

AWM 221 (5/98) ORIGINAL- COUNTY FIRST COPY- PERSON/FIRM INSPECTED SECOND COPY-INSPECTOR