



Restricted Use Pesticide

# ARKANSAS

# 2019 APPLICATION RECORD KEEPING FORM

**RECORD KEEPING IS REQUIRED FOR APPLICATIONS OF THIS PRODUCT.**

- The certified applicator must keep the following records for a period of three years and be available for inspection by a Plant Board representative
- Records must be generated as soon as practical but no later than 72 hours after application
- A separate record must be kept for each application
- Additional record keeping forms can be found at: [XtendiMaxApplicationRequirements.com](http://XtendiMaxApplicationRequirements.com)

Crop Owner Name: \_\_\_\_\_ Crop Owner Address: \_\_\_\_\_

Certified Applicator Name: \_\_\_\_\_ State Certification # of Applicator: \_\_\_\_\_

**REQUIRED  
DICAMBA  
APPLICATOR  
TRAINING**

Date Completed (MM/DD/YY): \_\_\_/\_\_\_/\_\_\_ Provider (be sure to retain proof of completion): \_\_\_\_\_

**ENDANGERED  
SPECIES  
CONCERNS**

Additional protection measures are required in specific counties where endangered species may exist. Visit [EPA.gov/Endangered-Species](http://EPA.gov/Endangered-Species) or call 1-844-447-3813 for more information.

Date and Name of the Sensitive Crop Registry Consulted: \_\_\_/\_\_\_/\_\_\_ \_\_\_\_\_

**AND**

Date Adjacent Fields Were Surveyed for Sensitive Crops: \_\_\_/\_\_\_/\_\_\_ (findings) \_\_\_\_\_



**DOCUMENT THE CROPS/AREAS SURROUNDING THE FIELD PRIOR TO APPLICATION**

Indicate the primary entrance to the field.

**SENSITIVE  
CROP  
AWARENESS**


Retain receipt of each purchase for each application. Retain copy of all product labels, including state labels where applicable.  
(Current label can be found at: [XtendiMaxApplicationRequirements.com](http://XtendiMaxApplicationRequirements.com))

**PRE-APPLICATION INFORMATION**

Approved Dicamba Product Name & EPA Reg. #: \_\_\_\_\_

To Be Applied To:    Corn     Cotton     Soybeans     Other

County of Application (required): \_\_\_\_\_    Nearest Town to Application (required): \_\_\_\_\_

Physical Address of Application (if applicable): \_\_\_\_\_    GPS or Map Coordinates of Application (required): \_\_\_\_\_

Buffer Distance Calculation: \_\_\_\_\_    Size of Treated Area: \_\_\_\_\_

Check to Confirm Spray System Equipment Is Cleaned Prior to Using:  (notes) \_\_\_\_\_

**NOZZLE INFORMATION**

Manufacturer/Brand: \_\_\_\_\_    Type: \_\_\_\_\_

Orifice Size: \_\_\_\_\_    Operating Pressure: \_\_\_\_\_

**TIMING**

Date of Application: \_\_\_\_/\_\_\_\_/\_\_\_\_    Date Crop Planted: \_\_\_\_/\_\_\_\_/\_\_\_\_    Days After Planting: \_\_\_\_\_

Burndown/Early Planting     Preplant     At-Planting     Pre-emergence     Postemergence

**SPRAYING INFORMATION**

	APPLICATION START:	APPLICATION END:
Time:	_____	_____
Air Temperature (°F):	_____	_____
Wind Speed (at boom height):	_____	_____
Wind Direction (direction from which wind is blowing):	_____	_____
Instrument Used (to measure wind speed and direction):	_____	_____
Location of Instrument (at time of readings):	_____	_____
Approved Dicamba Rate Per Acre:	_____	N/A
Total Amount Applied (gallons):	N/A	_____
Tank-Mix Products (brand names and EPA reg #s, if applicable):	_____	_____

Type of Equipment Used: \_\_\_\_\_    Application Equipment Number (if applied by a commercial applicator): \_\_\_\_\_

Spray System Equipment Cleanout (utilizing product specific triple rinse procedure):  (notes) \_\_\_\_\_