STATE OF CALIFORNIA

MONTHLY SUMMARY PESTICIDE USE REPORT

PR-ENF-060 (REV. 4/92)

INSTRUCTIONS FOR COMPLETING THIS FORM ARE INDICATED BELOW

DEPARTMENT OF PESTICIDE REGULATION
PESTICIDE ENFORCEMENT BRANCH

OPERATOR (FIRM NAME)	ADDRESS	CITY	ZIP CODE	PHONE NUMBER

OPERATOR ID/PERMIT NUMBER	LICENSE NUMBER	COUNTY WHERE APPLIED	COUNTY NUMBER	MONTH/YEAR OF USE	TOTAL NUMBER OF APPLICATIONS

1. Complete Columns A, B, C, and D for All Users
2. Complete Column E by Using one of the Following Codes
Code 10 - Structural Pest Control.....includes any pest control work performed within or on buildings and other structures.
Code 30 - Landscape Maintenance Pest Control.....includes any pest control work performed on landscape plantings around residences, or other buildings, golf courses, parks, cemeteries, etc.
Code 40 - Right-of-Way Pest Control.....includes any pest control work performed along roadsides, power lines, median strips, ditch bands and similar sites.
Code 50 - Public Health Pest Control.....includes any pest control work performed by or under contract with State or local public health or vector control agencies.
Code 80 - Vertebrate Pest Control.....includes any pest vertebrate pest control work performed by public agencies or work under the supervision of the State or county agricultural commissioner.
Code 91 - Commodity Fumigation (Nonfood/Nonfeed).includes fumigation of nonfood/nonfeed commodities such as pallets, dunnage, furniture, burlap bags, etc.
Code 100 - Regulatory Pest Control.....includes any pest control work performed by public employees or contractors in the control of regulated pests.
3. Complete Columns F and G, if Use Does not Fit one of the Above Codes

A	B	C	D	E	F	G
MANUFACTURER AND NAME OF PRODUCT APPLIED	EPA/CALIFORNIA REGISTRATION NUMBER FROM LABEL (INCLUDE ALPHA CODE)	TOTAL PRODUCT USED (Check One Unit of Measure)	NUMBER OF APPLICATIONS	CODE	COMMODITY OR SITE TREATED	ACRES/UNITS TREATED
	– – –	☐ LB ☐ OZ ☐ PT ☐ QT ☐ GA				
	– – –	☐ LB ☐ OZ ☐ PT ☐ QT ☐ GA				
	– – –	☐ LB ☐ OZ ☐ PT ☐ QT ☐ GA				
	– – –	☐ LB ☐ OZ ☐ PT ☐ QT ☐ GA				
	– – –	☐ LB ☐ OZ ☐ PT ☐ QT ☐ GA				
	– – –	☐ LB ☐ OZ ☐ PT ☐ QT ☐ GA				
	– – –	☐ LB ☐ OZ ☐ PT ☐ QT ☐ GA				
	– – –	☐ LB ☐ OZ ☐ PT ☐ QT ☐ GA				

REPORT PREPARED BY _____ DATE _____

Reports must be submitted to the county agricultural commissioner by the 10th of the month following the month in which the work was performed.