APPLICATION - RESTRICTED MATERIALS PERMIT																		
F					FOR POSSESSIO	N ONLY	FOR POSSESSION AND US	PERMIT	TEE			IT NO						
PERMITTEE ADDRESS CITY				ITY	ZIP	PHON	IE	TYPE OF PERMIT			EXPIRATIO							
									SEASONAL JOB									
PRIVATE APPLICATOR STRUCTURAL PCO																		
NOTICE OF INTENT REQUIRED MUST BE SUBMITTE						D AT LEAST HOURS PRIOR TO APPLICATION. METHOD:												
A. PESTICIDES/PESTS																		
1						6	11											
2						7												
3						8												
4.						9												
5					<u>.</u> .	10.	15											
B. LOCATION	SEC	TWN	RNG	MAP ID	COMMODITY	ACRES/UNITS	B PESTICIDES	S	PESTS	F*	M**	RATE	DILUTION/ VOLUME	APPL	DATE/TIME			
1.																		
2.																		
3.																		
4.																		
5.																		
6.																		
PCO NAME			ADDRE	ESS		PHONE	PCO NAME		AD	DRE	SS			PHONE				
C. JUSTIFICATION FOR NON-AG	GUSE:						I											
D. CONDITIONS:																		
	as not	elieve	me fro	n lizbili	ity for any damage to	nersons or proper	ty caused by the use of the	a nasticidas Luci	ve any claim of		*FORM			פווחח				

liability or damages against the County Department of Agriculture based on t pesticides are used in conflict with the manufacturer's labeling or in violation inspection at all reasonable times and whenever an emergency exists by the areas treated or to be treated, storage facilities for pesticides or emptied com alternatives and mitigation measures pursuant to Title 3, California Code of R technological factors, I have adopted those that are feasible and would subst	**METHOD: AAIR GRGROUND FFUMIGATION OOTHER	
APPLICANT RESTRICTED MATERIAL PERMIT IS HEREBY GRANTED FOR THE ABOVE N	 TITL	E DATE DATE
		STATE OF CALIFORNIA

## PERMIT NO.

## **APPLICATION - RESTRICTED MATERIALS PERMIT - SUPPLEMENT**

PAGE NO.

LOCATION	SEC	TWN	RNG	MAP ID	COMMODIT	ACRES/ Y UNITS	PESTICIDES	PESTS	F*	M**	RATE	DILUTION/ VOLUME	APPL	DATE/ TIMING	
7.															
8.															
9.															
10.															
11.															
12.															
13.															
14.															
15.															
16.															
17.															
18.															
19.															
20.															
21.															
22.															
23.															
24.															
25.															
26.															
27.															
28.															
29.															
30.															
31.															
*Formulation: LLiquid BBait DDust FFumigant G WPWettable Powder OOther	APPLICANT SIGNATUREDATE														
**Method: AAir FFumigation GrGround OOti		ISSUED BY													
						STATE OF CALIFORNIA									
DISTRIBUTION: COUNTY AGRICULTURAL COMMISSIONER; PERMITTEE						DEPARTMENT OI PR-ENF-12					REGULATI 7) Page 1 (	ON of 1	Print Form		