Spray Plan for		Applicator			Date of plan			
Address		Block Name			<u>Method</u> Bo	oom Ae	erial Handgun	K/Sack
FARM MAP	N	Target						,
	<b>†</b>	Month/s Days			Time of Day			
		Chemical to Use						
		Notification More than 12 hours Less than 3 Weeks						
		Neighbours Name		Phone Number	Email		Informed	
SPRAY AREA	N							
		Sensitive Areas			Sensitive crops / Trees			
		Water Ways			Public places			
		Glass houses Beehives			Sports fields			
					Animals to be moved			
		With holding period			Re-entry period			
		Other conditions or concerns						

