

All pesticide applicators must comply with the Idaho Pesticide and Chemigation Law, Title 22, Chapter 34, Idaho Code

_____ CWMA
**Individual Landowner Herbicide Application Record &
 In-Kind (IK) Contribution Report**

Please fill out and return/mail to _____ CWMA

<i>NAME:</i>	<i>ADDRESS:</i>	<i>PHONE: (208)</i>
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Date	Hours	Target Noxious Weed(s)	Equipment Used*	Location (Include GPS coordinates, or legal description, or attach map)	Herbicide	Rate	Amount of Herbicide	Treatment Acres	Treatment Area

Total Hours _____	Signature _____	For CWMA
Coordinator use only: please calculate: Total IK (labor + equipment + herbicide, if provided by landowner) for this page \$ _____		

For *Equipment*, list any of the following: ATV w/sprayer, pickup truck w/sprayer, backpack sprayer, transfer pump, trailer(s), saddle horse, tanker truck, GPS unit or any work directly related to weed management.