

Pre-Notification of the Use of Pesticides

(This notice should be received at least 72 hours prior to pesticide use)



Date: _____

To: Parents and guardians of students, and staff of _____

From: IPM Coordinator _____ Phone Number: _____

Subject: Notification of the Use of Non Low Impact Pesticides

This notice is to advise you that the following pesticide(s) will be used at :

| | | | |
|-------------------------|--|--|--|
| Pesticide Common Name | | | |
| Pesticide Trade Name | | | |
| EPA Registration Number | | | |

Location of the pesticide application: _____

Reason for the pesticide application: _____

If an indoor application, the date and time it is planned:

DATE _____ TIME _____

If an outdoor application, 3 dates must be listed, in chronological order, on which the outdoor application may take place if the preceding date is canceled.

DATE _____ DATE _____ DATE _____

Description of the possible adverse effects of the pesticide as per the Material Safety Data Sheets for the pesticides to be used, if available:

Pesticide product label instructions and precautions related to Public Safety.

Note: By law, we must advise you that: *The Office of Pesticide Programs of the United States Environmental Protection Agency has stated: "Where possible, persons who potentially are sensitive, such as pregnant women, infants, and children, should avoid any unnecessary pesticide exposure."*