CUSTOMER NOTICE AND SERVICE RECORD

Street address	City	State / ZIP	Date of service	Pages
				1

Ticket No.
License No.
Time

Customer name	Customer address

Target pest or purpose of service

Trade name of pesticide applied	EPA Reg. No.	Specific site where applied	Percent active ingredient	Diluted mix volume or total amount	Restricted use
					☐
					☐
					☐
					☐

Applicator	Certification No.	Applicator signature
Certified applicator providing supervision, if any	**Certification No.**	**Date**

Notes

Warning—Pesticides can be harmful. Keep children and pets away from pesticide applications until dry, dissipated, or aerated. For more information, contact

_____ **at** _____ .

business licensee's name and business license number issued by the PMD

business licensee's telephone number