FUMIGATION JOB LOG

Vikane label: The information followed by a "(B)" below must be documented before the initiation of the fumigation; other information listed below without a "B" must be documented during the fumigation process, if not before.

HRS 460J-21: "Fumigation shall be performed only under the direct supervision of an individual who is an applicator certified for structural fumigation by the department of agriculture and biosecurity."

HRS 460J-22: "A licensee shall maintain a log of each fumigation job performed by the licensee in this State."

Boxes marked (HI) hold the Board's job record (HAR 16-94-25.5) and the restricted use pesticide record (HAR 4-66-62(c)). The pounds of fumigant applied are that record's total amount used.

1. General information

Fumigation company (B)		**PCO license No.**		**Job No.**
Fumigation site address (B)			**Tax map key (TMK)**	
Structure type (B)		**Target pest(s) (B)**		
Client's name (HI)	**Client's address (HI)**			**Date of job (HI)**
Branch of pest control (HI)	**Chemicals and treatment method(s) used (HI)**			
Certified applicator in direct supervision (HRS 460J-21)			**DAB certification No.**	

2. Fumigant introduction

a. Dosing calculations

Dosage factor	**Tarp condition**	**Under seal type**	**Seal condition**	**Underseal**	**Wind (mph)**
Volume of fumigated space (1000 cubic feet) (B)		**Dose (oz/MCF)**	**Number of fans**	**Temperature**	**Hours of exposure**

b. Introduction of chloropicrin and sulfuryl fluoride

Certified applicator responsible for introduction		**DAB cert. No.**	**Signature**	
Second trained person(s) and certified applicator(s) assisting with introduction			**Cylinder serial number(s) of sulfuryl fluoride applied**	
Total ounces of warning agent chloropicrin introduced	**Number of introduction sites**	**Date of fumigant release**	**Time of fumigant release**	**Pounds of fumigant applied**

c. Restricted use pesticide record (HI)

Brand or common name of pesticide product applied		**EPA registration number**	**Type of formulation**	**Per cent active ingredient**	**Dilution rate**
Total area covered	**Crop, commodity, stored product or other site**		**Restricted entry interval**	**Posting and oral notification required?**	

3. Aeration

Certified applicator responsible for initiating aeration	DAB cert. No.	Signature

Certified applicator(s) and second trained person(s) assisting with initiating aeration		
Date aeration initiated	**Time aeration initiated**	**Minimum hours before re-entry**
Aeration procedure used ☐ Aeration Procedure 1 ☐ Aeration Procedure 2		☐ **Other procedure on current labeling:**

4. Final clearance testing

Certified applicator responsible for conducting final clearance testing	DAB cert. No.	Signature

Certified applicator(s) assisting final clearance testing		
Date final clearance testing completed	**Time completed**	**Clearance device model type**

Breathing zone readings, 1 ppm or less in each room before re-entry

Room or area	ppm	Room or area	ppm

Cleared for re-entry (date and time)	Warning sign removal authorized by

5. Emergency response information

Get exposed person to fresh air. Call 911 or an ambulance. Keep exposed person warm and at rest. Make sure person can breathe freely. If breathing has stopped, give artificial respiration. Do not put anything in the mouth of an unconscious person.

Hospital nearest to the site (name and address)	Product emergency phone (from the label)

6. Comments

HRS 460J-22: "The log shall be in the form required by the regulations of the board and shall be preserved for a period of at least two years, during which time it shall be available at all times during business hours for inspection by the board and its authorized representatives."

HAR 4-66-62(b): "These records must be kept for a period of two years and shall be made available for inspection and copying by the head during reasonable working hours."