

Grounds Pesticide Application Record

A professional grounds pesticide record covering the treatment area, authorised product, application details, weather, exposure controls and follow-up.

1. Record details and scope

Project

Filled in from the project in SiteSurvey.

Site or premises address

Client or organisation

Record date *

Person completing the record *

For competent professional grounds users recording authorised plant protection product use. This is not a product recommendation, rate calculator, application permission or proof that every legal record requirement is met.

HSE guidance explains that pesticide use must follow the product authorisation and label and that professional users must keep application records. Check the current requirements for the nation, product and use; registration duties may also apply.

2. Treatment authority

Site and treated area reference *

Target weed, pest or disease and need for treatment *

Operator and competence reference *

Risk assessment and alternative-control decision *

3. Product and application

Product name and authorisation number *

Current label/use authorisation reference *

Application date and start/finish times *

Actual dose/rate and units from approved use *

Record the actual rate and units with the current product label reference. Do not use a generic example as an application instruction.

Area treated, product quantity and water volume with units *

Application equipment and calibration reference *

4. Conditions and controls

Wind, temperature and other relevant conditions *

Public exclusion, drift, water and habitat controls *

Exposure controls and label PPE reference

Surplus, washings and container handling reference

5. Completion

Departures, incidents and escalation

Re-entry restriction and signage/notification

Effectiveness and follow-up review

6. Actions and review

Are further actions required? * (choose one)

☐ Yes ☐ No

Further action (copy this block for each one; if applicable)

Action and evidence reference *

Person responsible *

Target date

Action status * (choose one)

☐ Open ☐ In progress ☐ Completed

Completion evidence * (if applicable)

Outstanding limitations and information to pass on

Record status * (choose one)

☐ Ready for review ☐ Further work needed ☐ Work or use stopped

Reviewed by

Review date

Author signature *

Signing records the information entered. It does not itself certify legal compliance, remove a limitation or authorise unsafe work.