

# Thank You



For today's refreshments

# San Benito County Weed Management Area



24<sup>th</sup> Annual Continuing Education Seminar for Ranchers

# Continuing Education Hours



Today's seminar has been approved by the California Department of Pesticide Regulation for .5 hours CE units in Laws & Regulations and 2.5 hours of CE units in Other



## Private Applicator Certificate

- Any cardholders that seek renewal of their Private Applicator Certificate will need to take the Recertification Exam if they have not already taken it.
- Private Applicator Certificate holders:
  - Last name beginning A thru H expire December 31, 2027.
  - Last name beginning I thru Q expire December 31, 2025.
  - Last name beginning R thru Z expire December 31, 2026.



## Permit Renewals

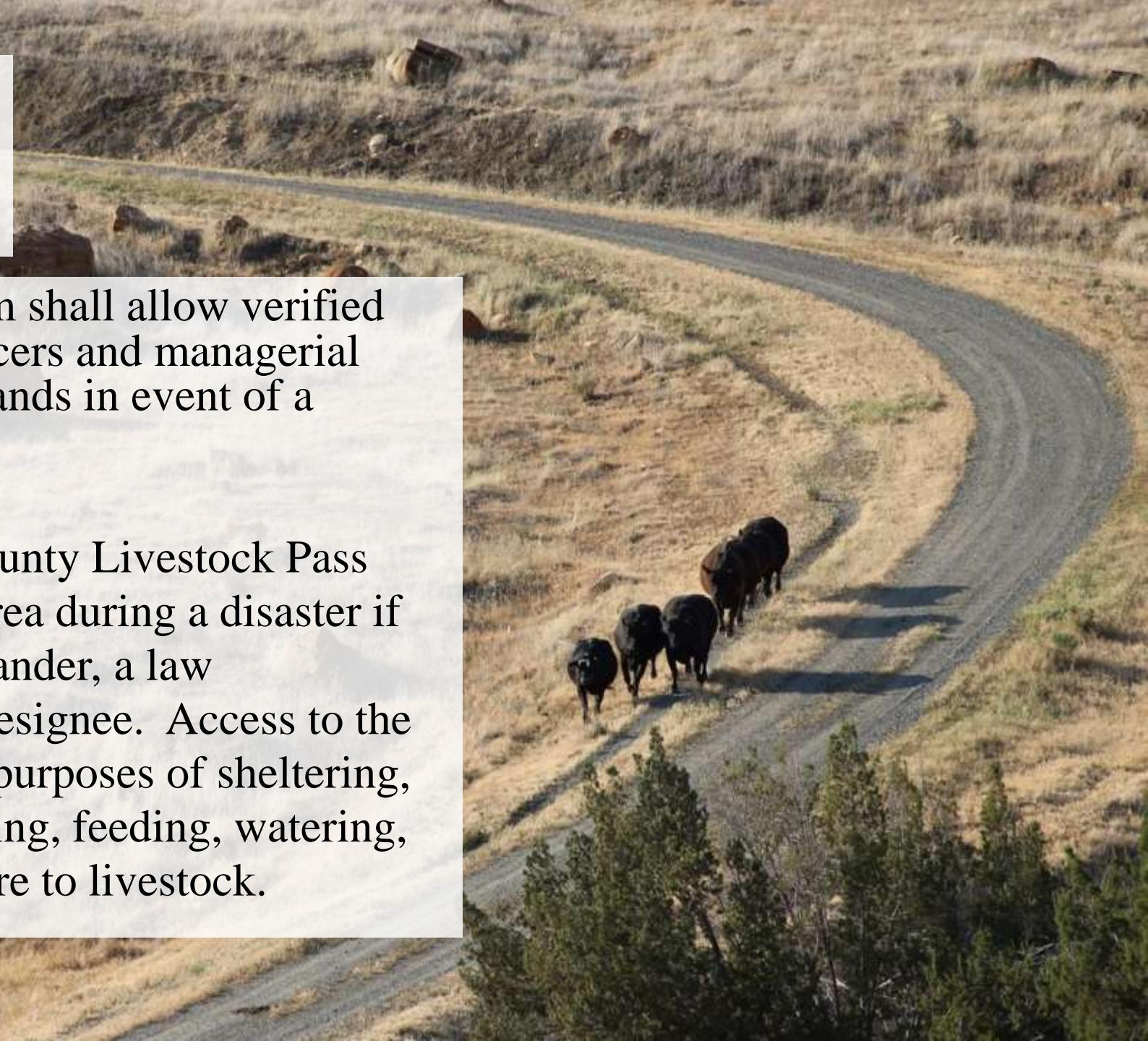
- Renewals for 2026 Operator Identification Numbers and/or Restricted Materials Permits with the Agricultural Commissioner's Office will begin on **December 10<sup>th</sup>**.

A wide-angle photograph of a large herd of cattle gathered behind a dark wooden fence in a dry, golden-brown field. The cattle are of various colors, including dark brown, black, and a few with white markings. The background features rolling hills and a line of mature trees under a sky filled with large, billowing clouds at sunset or sunrise, with the sun visible through the clouds.

# Livestock Pass

# Assembly Bill No. 1103

- The Livestock Pass Program shall allow verified commercial livestock producers and managerial employees access to ranch lands in event of a disaster.
- A holder of a San Benito County Livestock Pass may have access to a closed area during a disaster if granted by the incident commander, a law enforcement official or their designee. Access to the ranch property is only for the purposes of sheltering, moving, transporting, evacuating, feeding, watering, or administering veterinary care to livestock.



# Livestock Pass Requirements

- Prior to the issuance of a livestock pass, applicants must attend a 4-hour fire safety training led by CAL FIRE.
- Applicants shall provide the County Agricultural Commissioner with documentation to prove eligibility
- Maps of all lands owned or managed, including parcels in neighboring counties and access points to those lands



# Eligibility

- Must obtain or be able to present proof of one of the following:
  - Commercial **LIVESTOCK** Producer
  - Operator Identification Number issued by a County Agricultural Commissioner
  - Assessor's Parcel Number confirming agricultural zoning for the property upon which access is sought.
  - Agricultural land lease documentation
  - Williamson Act enrollment documentation

PHOTO



## LIVESTOCK PASS

License No. SBC-AG-###

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**Applicant Name**

DOB

Ranch Name(s) - Address

QR  
CODE



SCAN QR FOR ALLOWED  
ACCESS AND PASS  
DOCUMENTS

SHERIFF'S SIGNATURE

# Livestock Pass Program

- San Benito County currently has about 85 pass holders.
- Next meeting Spring/ Summer 2026
- Contact sheet available at the back of the room.



# Free Pesticide Disposal Event



 **COUNTY OF SAN BENITO**  
Ken Griffin, Acting AGRICULTURAL COMMISSIONER  
and Acting SEALER OF WEIGHTS & MEASURES  
[pesticide-disposal@county.ca.gov](mailto:pesticide-disposal@county.ca.gov)  
3228 Southside Road, Monterey, CA 93940 Phone (831) 637-5544

**To:** San Benito County Agricultural and Non-Production Agricultural Operations  
**From:** Ken Griffin, Acting Agricultural Commissioner and Sealer  
**Subject:** Free Pesticide Disposal Event 2016

The San Benito County Department of Agriculture, in partnership with Monterey, Santa Cruz and Santa Clara Counties, are planning a no-cost Pesticide Disposal Event in 2016. The event is for you to legally dispose of any unwanted pesticides, including banned and legacy pesticides, in your possession. We will receive these pesticides at no cost for agricultural producers, and non-production agriculture operations, such as: golf courses, parks, and cemeteries, who are permitted with their respective counties. Your participation requires evaluating and reporting all of your pesticides for disposal, as well as transportation of those pesticides to the event location.

No regulatory action will be pursued because of your participation.

This is an announcement of the preliminary survey to estimate the size, budget and scope of this event; please complete the survey with an estimated amount of material you would like to bring to the disposal event. A more detailed summary will be released from you when the event has been scheduled.

Please note:

- No containers over 50 lbs. or 5 gallons will be accepted.
- Pesticides containing diesel or mercury will **NOT** be accepted.
- Unknown white or black powders will **NOT** be accepted; they may be explosive.

If you are interested in this event, please complete the pre-registration survey. See QR Code here. Or go to this website:  
<https://surveymonkey.com/share/47c5867788f5841a6472ca0d4d205b>

**Please pre-register as soon as possible!**

This is **NOT** an empty container collection event.

Please contact the San Benito County Department of Agriculture for further information – (831)637-5544.



# Pesticide Recordkeeping Requirements for Ranching Operations



# Records you need to keep

- Restricted Materials Permit/Operator Identification number
- Pesticide Use Records
- Application Completion Notices
- Annual Notification of Pesticides used near Schools and Child Care Centers

Additional records you may need to keep if you have employees

- Emergency Medical Care
- Written Training Program for employees
- Training Records for Employees
- Safety Data Sheets (“SDS”)
- Pesticide Safety Information Series Leaflets (PSIS)
- Respiratory Protection Program Records (if necessary)
- Medical Supervision Program



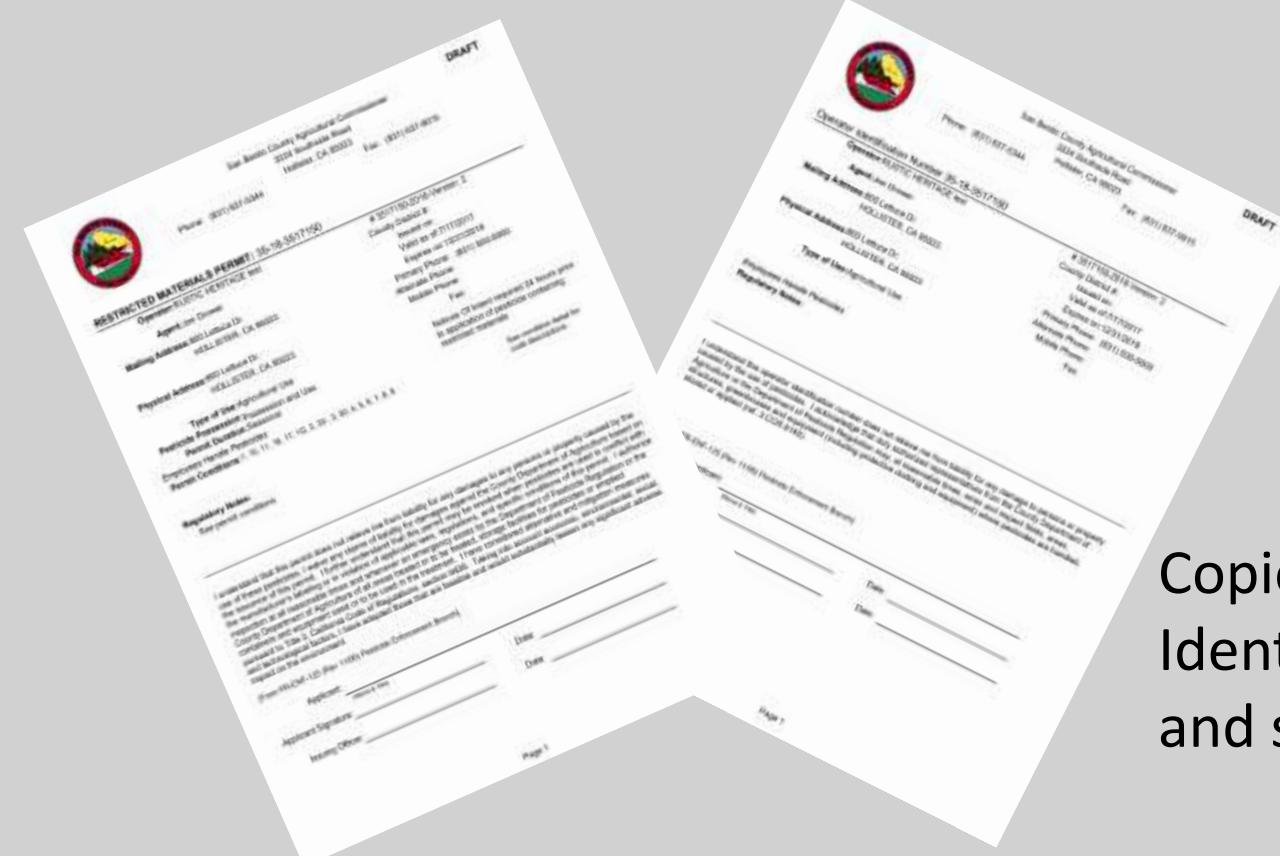
Ohhhh my goodness...seems like alot



It's really not that bad...

# Restricted Materials Permit or Operator Identification Number

Prior to the application of an Agricultural Use Pesticide or a California Restricted Material, you will need to obtain an Operator Identification Number or a Restricted Materials Permit.



Copies of Restricted Materials Permits or Operator Identification Numbers along with any associated map and supplements need to be kept for 2 years

# Possession Permit for Stored Restricted Materials



The person named in a restricted material permit is authorized to retain possession, except for sale, of materials for which the permit was valid after such permit expires...

# Pesticide Use Records

Pesticide use records must be kept by any person who uses pesticides for an agricultural use

MONTHLY SUMMARY PESTICIDE USE REPORT																																																																																																																										
INSTRUCTIONS FOR COMPLETING THIS FORM ARE INDICATED BELOW AND ON THE REVERSE SIDE																																																																																																																										
OPERATOR (FIRM NAME)	ADDRESS	CITY	ZIP CODE	PHONE NUMBER																																																																																																																						
OPERATOR ID/PERMIT NUMBER	LICENSE NUMBER	COUNTY WHERE APPLIED	COUNTY NUMBER	MONTH/YEAR OF USE	TOTAL NUMBER OF APPLICATIONS																																																																																																																					
<p>1. Complete Columns A, B, C, and D for ALL USERS</p> <p>2. Complete Column E by using one of the following codes:</p> <p>Code 10 - Structural Pest Control.....includes any pest control work performed within or on buildings and other structures.</p> <p>Code 30 - Landscape Maintenance Pest Control.....includes any pest control work performed on landscape plantings around residences or other buildings, golf courses, parks, cemeteries, etc.</p> <p>Code 40 - Right-of-Way Pest Control.....includes any pest control work performed along roadsides, power lines, median strips, ditch banks, and similar sites.</p> <p>Code 50 - Public Health Pest Control.....includes any pest control work performed by or under contract with State or local public health or vector control agencies.</p> <p>Code 80 - Vertebrate Pest Control.....includes any vertebrate pest control work performed by public agencies or work under the supervision of the State or county agricultural commissioner.</p> <p>Code 90 - Commodity Fumigation.....includes fumigation of nonfood/nonfeed commodities.</p> <p>Code 91 - Fumigation, Other (Nonfood/Nonfeed).....includes fumigation of nonfood/nonfeed commodities such as pallets, Dunnage, furniture, burlap bags, etc.</p> <p>Code 100 - Regulatory Pest Control.....includes any pest control work performed by public employees or contractors in the control of regulated pests.</p> <p>3. Complete Columns F and G, if use DOES NOT fit one of the above codes</p> <table border="1"><thead><tr><th>A</th><th>B</th><th>C</th><th>D</th><th>E</th><th>F</th><th>G</th></tr><tr><th>MANUFACTURER AND NAME OF PRODUCT APPLIED</th><th>EPA/CALIFORNIA REGISTRATION NUMBER FROM LABEL (INCLUDE ALPHA CODE)</th><th>TOTAL PRODUCT USED (CHECK ONE UNIT OF MEASURE)</th><th>NUMBER OF APPLICATIONS</th><th>CODE</th><th>COMMODITY OR SITE TREATED</th><th>ACRES/UNITS TREATED</th></tr></thead><tbody><tr><td></td><td></td><td><input type="checkbox"/> LB <input type="checkbox"/> OZ <input type="checkbox"/> PT <input type="checkbox"/> QT <input type="checkbox"/> GA</td><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td><input type="checkbox"/> LB <input type="checkbox"/> OZ <input type="checkbox"/> PT <input type="checkbox"/> QT <input type="checkbox"/> GA</td><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td><input type="checkbox"/> LB <input type="checkbox"/> OZ <input type="checkbox"/> PT <input type="checkbox"/> QT <input type="checkbox"/> GA</td><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td><input type="checkbox"/> LB <input type="checkbox"/> OZ <input type="checkbox"/> PT <input type="checkbox"/> QT <input type="checkbox"/> GA</td><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td><input type="checkbox"/> LB <input type="checkbox"/> OZ <input type="checkbox"/> PT <input type="checkbox"/> QT <input type="checkbox"/> GA</td><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td><input type="checkbox"/> LB <input type="checkbox"/> OZ <input type="checkbox"/> PT <input type="checkbox"/> QT <input type="checkbox"/> GA</td><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td><input type="checkbox"/> LB <input type="checkbox"/> OZ <input type="checkbox"/> PT <input type="checkbox"/> QT <input type="checkbox"/> GA</td><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td><input type="checkbox"/> LB <input type="checkbox"/> OZ <input type="checkbox"/> PT <input type="checkbox"/> QT <input type="checkbox"/> GA</td><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td><input type="checkbox"/> LB <input type="checkbox"/> OZ <input type="checkbox"/> PT <input type="checkbox"/> QT <input type="checkbox"/> GA</td><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td><input type="checkbox"/> LB <input type="checkbox"/> OZ <input type="checkbox"/> PT <input type="checkbox"/> QT <input type="checkbox"/> GA</td><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td><input type="checkbox"/> LB <input type="checkbox"/> OZ <input type="checkbox"/> PT <input type="checkbox"/> QT <input type="checkbox"/> GA</td><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td><input type="checkbox"/> LB <input type="checkbox"/> OZ <input type="checkbox"/> PT <input type="checkbox"/> QT <input type="checkbox"/> GA</td><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td><input type="checkbox"/> LB <input type="checkbox"/> OZ <input type="checkbox"/> PT <input type="checkbox"/> QT <input type="checkbox"/> GA</td><td></td><td></td><td></td><td></td></tr><tr><td colspan="6">REPORT PREPARED BY _____ DATE _____</td></tr><tr><td colspan="6">Distribution: CAC – Two copies; 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## Application and location

- Date and time of application
- Operator's name, address, and phone number
- Location of the property treated, including geographic details like section, township, range, and site ID
- Crop, commodity, or site that was treated
- Total acreage or units treated

## Pesticide and product information

- Name of the pesticide product and its manufacturer
- U.S. EPA or California registration number (including alpha codes) for the product used
- Total amount of formulated product used (do not report diluted mixture)
- Rate and dilution at which the pesticide was applied per acre

## Other required information

- Method of application (e.g., ground, aerial)
- Operator/firm information
- Name of the county where the application was made
- Applicator's name and signature

Pesticide use reports must be retained for 2 years

# Ways to report pesticide use

You can report pesticide use online using Cal Ag Permits (<https://www.calagpermits.org> )

Monthly Pesticide Use Report - Production Ag Growers/Operators only

Report Status:  Pending  Approved  Rejected

Submittal Status:  Pending  Approved  Rejected

Time Stamp:

Operator ID/ Permit #  Save Report

Document #

Report Month/Year  MM / YYYY

Operator (Grower)	County	Address	City	Zip Code	
Section	Township	Range	Base & Meridian	Location	Planted Area/Units

**Now**  Start Application Date/Time

**End Application Date/Time**

Application Method/Form Code  choose one...

**Line #1**

Site Identification Number	Block ID
Commodity Treated	Applied prior to planting <input type="checkbox"/> Treated Area - Units <input type="text"/> A - ACRES <input type="button" value=""/>
Product EPA Number/Name	Days Re-entry <input type="text"/> Dilution <input type="text"/> choose one... <input type="button" value=""/>
Total Product Used - Units	Rate <input type="text"/>

Or submit to our office by mail, fax or in person

STATE OF CALIFORNIA  
DEPARTMENT OF PESTICIDE REGULATION  
DPR/PMA-6170 (REV. 10/04) Page 1 of 2

**PRODUCTION AGRICULTURE MONTHLY PESTICIDE USE REPORT**

Submit to the Agricultural Commissioner within 10 days of the month following application.

1. Month	2. Year										
3. Operator (DPermit No.)	4. Operator (Owner)	5. Address	6. City	7. Zip Code							
8. Site Identification No.	9. Total Planted Acre/Units	10. County Number	11. Section	12. Township <input type="checkbox"/> N <input type="checkbox"/> S <input type="checkbox"/> E <input type="checkbox"/> W	13. Range <input type="checkbox"/> N <input type="checkbox"/> S <input type="checkbox"/> E <input type="checkbox"/> W	14. Base & Meridian <input type="checkbox"/> S <input type="checkbox"/> N <input type="checkbox"/> W <input type="checkbox"/> E					
15. Community Site Treated	16. Field Location										
17. Date/Time of Start of Application	18. Date/Time of Completion of Application	19. Acreage Units Treated	20. Pre-Plant (if Applicable)	21. Application Method (Check One)	22. WMA ID (if Applicable)	23. Applicator Registration Number (From Label)	24. Total Product Used	25. Days Ready	26. Rate Per Acre	27. Dilution	28. Product and Manufacturer

Report Prepared by \_\_\_\_\_ Date \_\_\_\_\_ Reviewed by \_\_\_\_\_ For Agency Use Only \_\_\_\_\_

Distribution: (1) DAC; (2) Applicator  
SUBMIT TO AGRICULTURAL COMMISSIONER WITHIN 10 DAYS OF MONTH FOLLOWING APPLICATION

Reports must be submitted by the 10<sup>th</sup> day of the month following the application date

# Pesticide Use Records

In addition, an application of a Federal or California Restricted material by a Pest Control Business must contain the following additional information on the Pesticide Use Report:

**The address where the restricted material was used, unless the property operator's Restricted Materials Permit number or Operator Identification Number is already on the Pesticide Use Report**

**The commercial applicator's name and license or certificate number**

**The name of any noncertified applicators using the restricted material under the certified applicator's supervision**

**The physical address where handler training records are kept for each noncertified applicator**



**All pesticide use records must be retained for 2 years**

# Notice of Completed Applications

If you have a pesticide application done by a Pest Control Business, they are required to send you an Application Completion Notice

Application Completion Notices must include:

- Location and description of the treated field
- The pesticide name, EPA Registration Number, and the active ingredients
- The names and EPA Registration numbers of any spray adjuvants included in the application
- The dates and times the application started and ended
- Restricted Entry Interval and any pre-harvest intervals

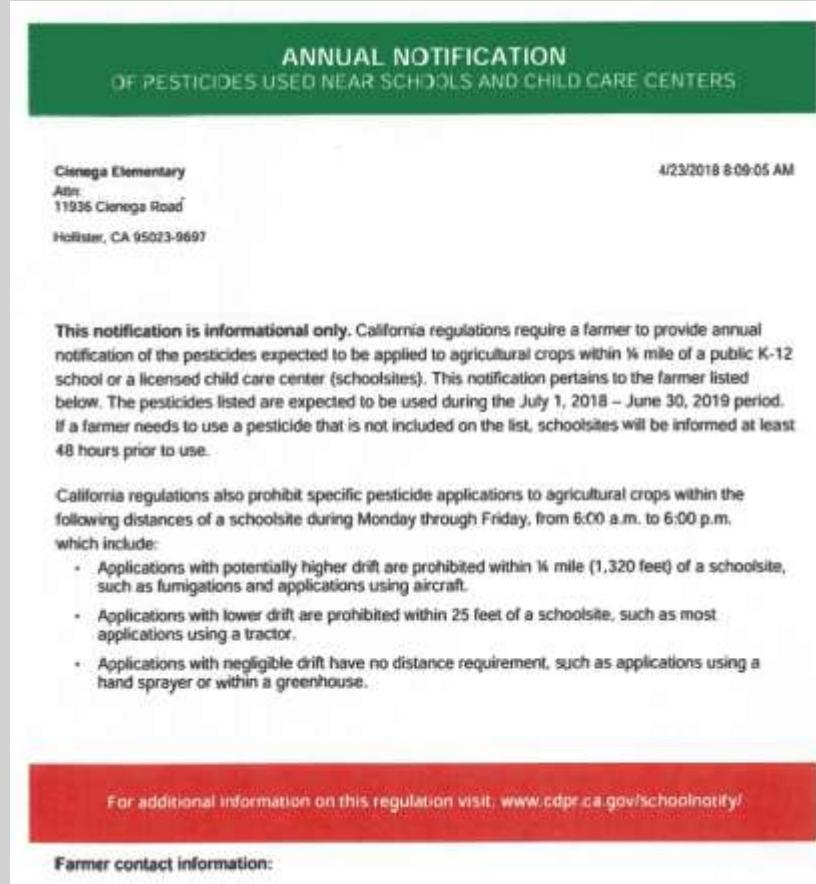
Page No. 1 of 2

COMPLETION NOTICE / USE REPORT				Converted From REC-9310376	
Grower Taylor Farming Llc (organic) Zenate (San Benito County) - 2025 1219 Abbott Street Salinas, CA 93901		County San Benito		Site Commodity CILANTRO	
		Permit No 27k033x	REI 24 Hours	PHI 0 Days	
Site ID / STR	Location			Treated Area	
5915 22, 125.05E M	HERBERT RANCH LOT 15			4.27 Acres	
Block ID	Block Name	Planted	Treated	N: CILANTRO	E: ROMAINE
5915A	15A	4.27 Acres	4.27 Acres	S: PEPPERS	W: ROAD
Chemical Information					
Chem. No.	Product Name & EPA Number	Active Ingredient	Total Applied	Rate	Dilution
~	BioLink Additive (51517-50004-AA)	(50.00% - Citric Acid)	1.07 Ga	0.25 Ga	100 Ga
	HOMEPLATE (CA, HI, & NY) (57702-54-AA-70051)	(45.14% - Caprylic Acid)	1.7.08 Ga	4 Ga	100 Ga
	OROBOOST (72962-50005-AA)	(13.58% - Secondary Alcohol Ethoxylate)	1.07 Ga	0.25 Ga	100 Ga
	Amersand (CA) (82968-50001-AA)	(20.30% - Total Principle Functioning Agents)	0.8 Ga	0.12 Ga	100 Ga
Application Information					
Applicator PINNACLE APPLICATION (HOLLISTER BRANCH) 2790 BUENA VISTA ROAD HOLLISTER 95023	Applicator ID 41342	Method Ground	Organic	Commodity CILANTRO 13001-00	Date/Time Started 2025-05-09 02:00:00 Date/Time Completed 2025-05-09 02:40:00

Any Notices of Completed Applications sent to you by Pest Control Businesses must be retained for 2 years

# Pesticide Use Near Schoolsites

An annual notification to any “Schoolsite” located within  $\frac{1}{4}$  mile of a site where pesticide applications occur must be made by April 30 of each year by the property operator



This notification includes contact information and a list of all pesticides expected to be used during the upcoming July through June school year

Schoolsites include public K-12 schools and licensed child day care facilities

A copy of the Annual Notification needs to be kept for 2 years.

# Additional Requirements if you have employees

- Emergency Medical Care
- Written Training Program
- Training Records for Employees
- Safety Data Sheets (“SDS”)
- Pesticide Safety Information Series Leaflets (PSIS), A8 and A9
- Respiratory Protection Program Records (if necessary)
- Medical Supervision Program (if necessary)



# Emergency Medical Care

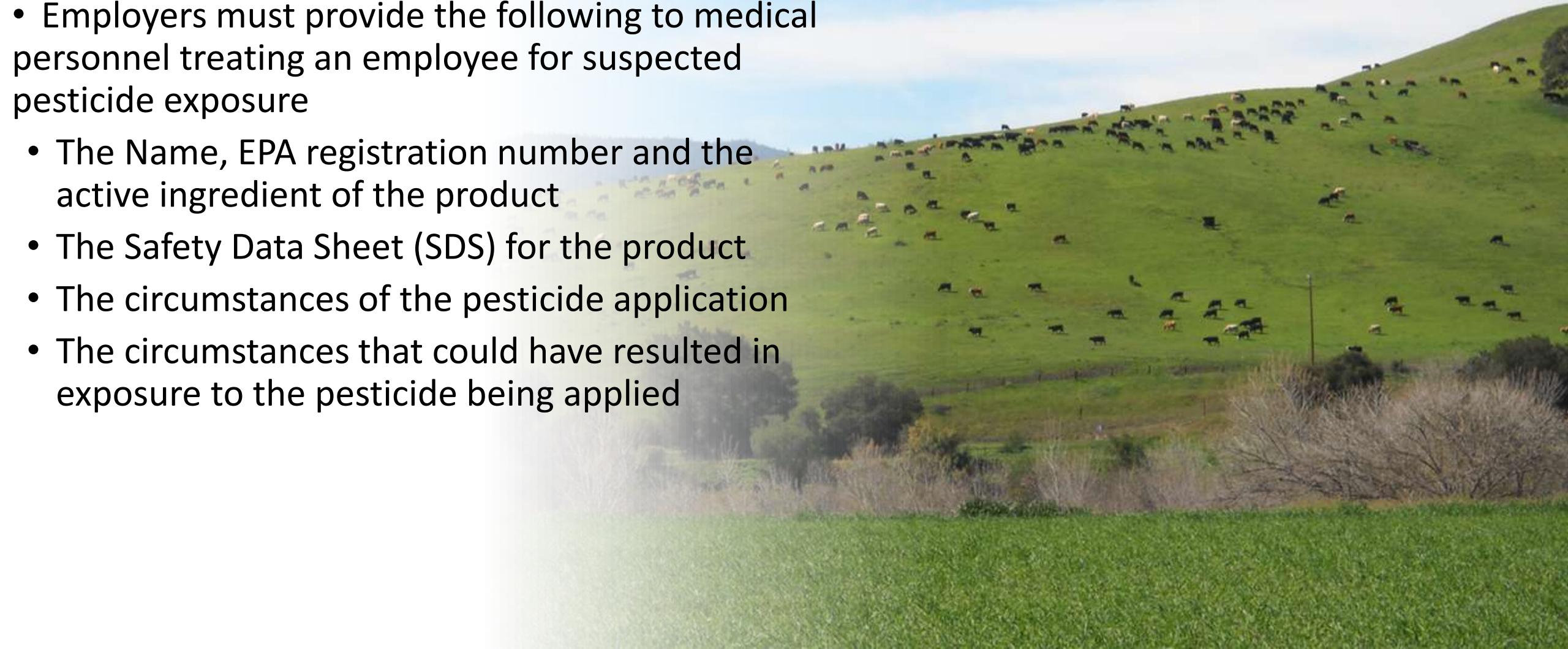


- Emergency medical care for employees who apply pesticides (Handler) and for any employees who may enter a field that was been treated with a pesticide (Field Worker) shall be planned for in advance.
- Record the location of the facility on the A-8 or A-9

# Emergency Medical Care Planned

In addition:

- Employers must provide the following to medical personnel treating an employee for suspected pesticide exposure
  - The Name, EPA registration number and the active ingredient of the product
  - The Safety Data Sheet (SDS) for the product
  - The circumstances of the pesticide application
  - The circumstances that could have resulted in exposure to the pesticide being applied



# Written Training Programs for Employees

A description/listing of the training materials used (examples are study guides, PSIS leaflets, SDS, Pesticide Labels, etc)

The name of the person or firm that is providing the training



More information on training programs can be found on the California Department of Pesticide Website at <https://www.cdpr.ca.gov/information-for-employers-and-trainers/>

# Training for Field workers

Employers must provide training for field worker employees before they are allowed to enter a treated field

Pesticide Training <b>Fieldworker Training Record</b>	
Name of Employer: _____	Date of training: _____
Crew Identification (optional): _____	Crew foreman (optional): _____
See Next Page for Name(s) of Trainees	
<b>Name of Trainer:</b> <input type="checkbox"/> Certified Applicator Type: _____ <input type="checkbox"/> Pest Control Adviser License #: _____ <input type="checkbox"/> Lic/Cert #: _____ <input type="checkbox"/> Registered Professional Forester #: _____ <input type="checkbox"/> UCCE Adviser <input type="checkbox"/> County Biologist License from CDFA <input type="checkbox"/> Instructor Training Program (attach certificate copy) <input type="checkbox"/> Other DPR-approved qualification (attach copy)	
<b>Fieldworker Pesticide Safety Training Topics</b> required by 3CCR section 6764:  <input type="checkbox"/> - Where and in what forms pesticides and residues may be encountered <input type="checkbox"/> - Potential hazards that pesticides present to fieldworkers and their families, including acute, chronic, delayed, and sensitization effects <input type="checkbox"/> - How pesticides can enter the body <input type="checkbox"/> - Signs and symptoms of overexposure <input type="checkbox"/> - Prevention, recognition, and first aid for heat-related illnesses per 3CCR section 3395 <input type="checkbox"/> - Wear work clothing that protects the body from pesticide residues. Wash work clothes separately from other laundry <input type="checkbox"/> - Information provided by Safety Data Sheets <input type="checkbox"/> - Hazard communication requirements (Pesticide use records, Application-Specific Information, SDS availability, Completed A-9 location) <input type="checkbox"/> - Routine decontamination procedures and the employer's responsibility to provide decontamination supplies <input type="checkbox"/> - Wash hands before eating, drinking, using the toilet, chewing gum, or using tobacco <input type="checkbox"/> - Thoroughly wash or shower with soap and water <input type="checkbox"/> - Change into clean clothes as soon as possible <input type="checkbox"/> - First aid and emergency decontamination procedures (including emergency eye flushing and procedures if pesticides are spilled or sprayed on the employee) <input type="checkbox"/> - How and when to obtain emergency medical care  <input type="checkbox"/> - Each employee must be trained within the last 12 months and before assignment to work in a treated field <input type="checkbox"/> - Training shall be presented in a manner the employee can understand using nontechnical terms, including response to questions <input type="checkbox"/> - Training location reasonably free from distraction and trainer must be present throughout entire presentation <input type="checkbox"/> - This record must be kept for two years, must be accessible to the employee, and must be provided to the employee, the County Agricultural Commissioner or the Department of Pesticide Regulation upon request	
<i>Continued on next page</i>	
(Rev. 6/2018) Page 1 of _____	

The training record must include:

- Date of training
- Employee's printed name and signature
- Title and source of the training materials used
- Employers name
- Trainer's name and qualification

Employers are responsible for retaining records of the Field Worker's training for 2 years.

CCR 6764(e)

# Training for Pesticide Handlers

Employers must provide training for employees before they are allowed to apply any pesticides

- Training must be repeated at least on an annual basis
- Training must be updated before any new pesticides are applied

Training records must contain the following information:

- The date and extent of the initial/annual training
- Job assignment of the employee (applicator, mixer/loader, service/repair)
- Employee's printed name
- Employee's signature
- The titles and sources of the training materials
- The employers name
- The trainer's name

**Pesticide Training  
Employer's Written Handler Training Program**  
Pursuant to 3 CCR section 6724

**(Name of Employer)**  
Name of Firm or Person Providing Training

**Note:** For the commercial or research production of an agricultural crop commodity, the employer must ensure the trainer is one of the following at the time of training: research scientist or equivalent status or:   
▪ A California-qualified applicator (certified or state) for Agricultural Pest Control Advisor  
▪ A County Biological License as Pesticide Regulator or Agricultural and Environmental Monitoring  
▪ A person who has completed one "handler training" program  
▪ A person who has completed one "pesticide handler" program  
▪ Other person qualified approved by DPR

**Training Materials:**  
Name of videos, pamphlets, study guides, or other training materials, and a brief description:  
1 \_\_\_\_\_  
2 \_\_\_\_\_  
3 \_\_\_\_\_  
4 \_\_\_\_\_  
5 \_\_\_\_\_  
(Attach additional pages if necessary)

**Circle Pesticide Safety Information Series (PSIS) Leaflets Used:**  
A-1 A-2 A-3 A-4 A-5 A-6 A-7 A-8 A-9 A-10  
N-1 N-2 N-3 N-4 N-5 N-6 N-7 N-8

**Pesticide product labeling and Safety Data Sheets (SDSs) as used below:**

Product Name	Labeling?	SDS?
1	Yes / No	Yes / No
2	Yes / No	Yes / No
3	Yes / No	Yes / No
4	Yes / No	Yes / No
5	Yes / No	Yes / No
6	Yes / No	Yes / No
7	Yes / No	Yes / No
8	Yes / No	Yes / No
9	Yes / No	Yes / No
10	Yes / No	Yes / No
11	Yes / No	Yes / No

(Attach additional pages if necessary)  
(Circle Yes or No)

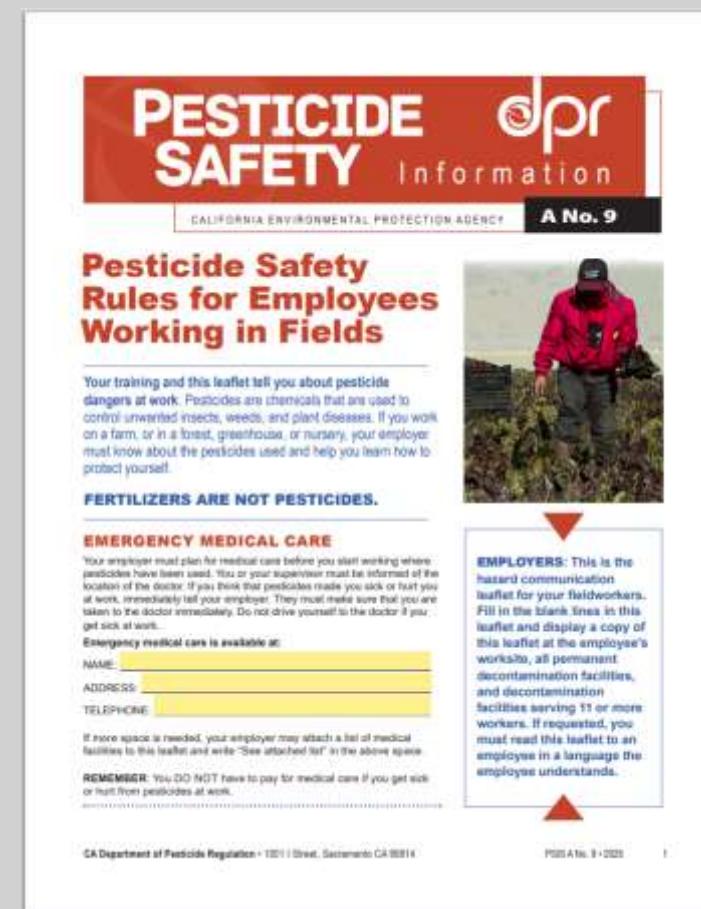
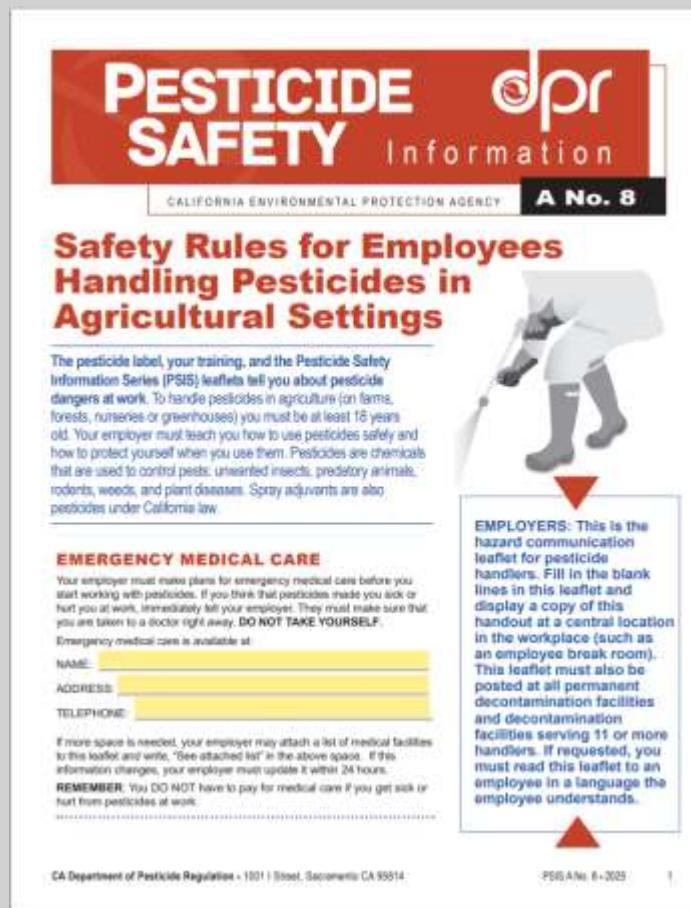
Comments on other pages:

Employers are responsible for retaining records of the Handler's training for 2 years.

# Pesticide Safety Information Series (“PSIS”) Leaflets

All PSIS leaflets in various languages can be found on the DPR website at:  
<https://www.cdpr.ca.gov/worker-health-and-safety/education-series/>

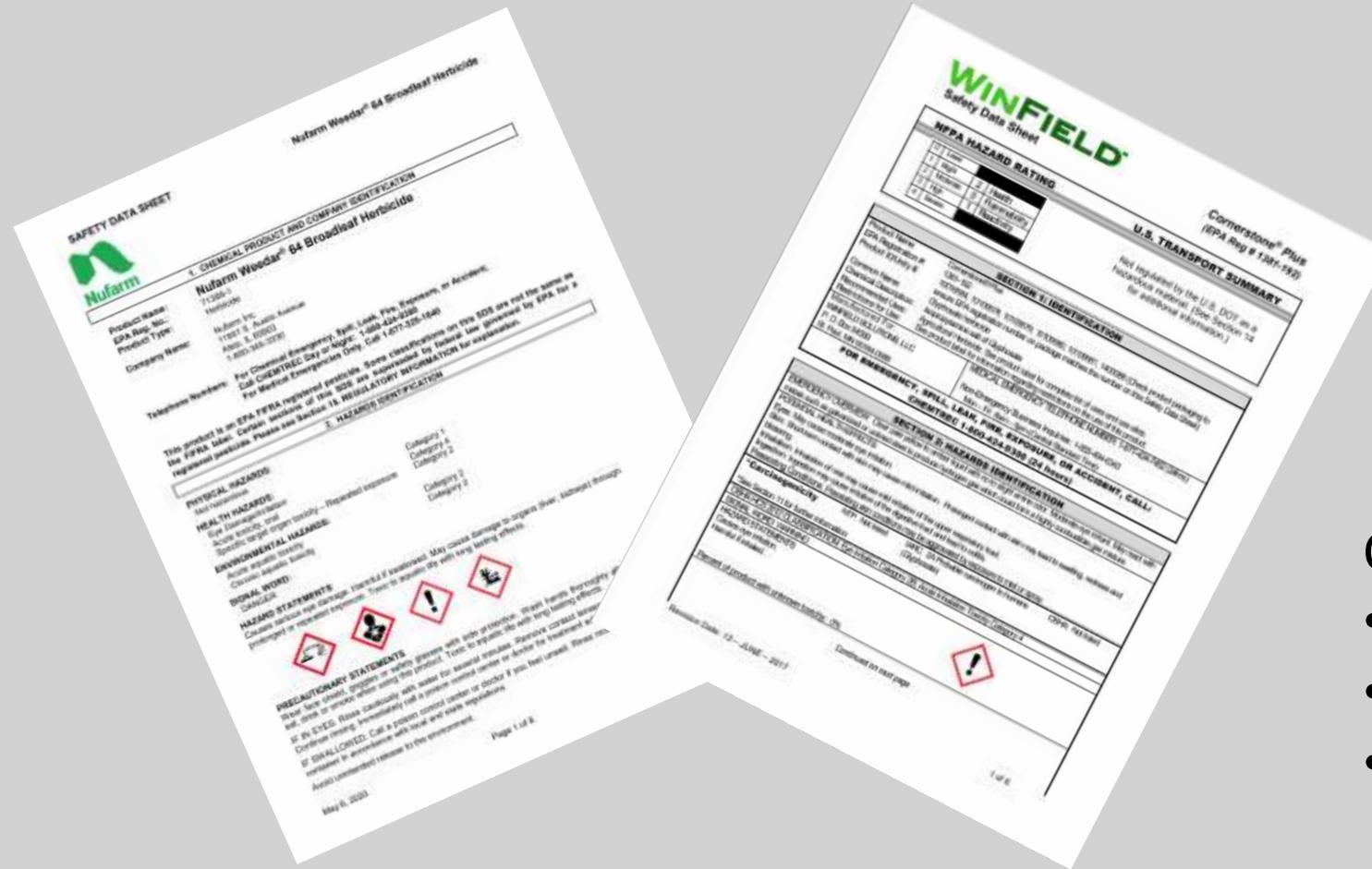
Completed PSIS A-8 is required for Handler employees



Completed PSIS A-9 for Field Worker employees

# Safety Data Sheet (“SDS”)

You need to have copies of the Safety Data Sheets (SDS) for all the pesticides applied to your ranch.



Copies of SDS can be obtained from:

- Your supplier
- Pesticide manufacturer's website
- Databases such as Agrian, CMDS

# Respiratory Protection Program (if required)

If you are required to have a respiratory protection program:

- Records shall be maintained while the employee is required to use respiratory protection and for 3 years after the end of employment conditions requiring respiratory protection.

If no pesticides are being applied which require the use of a respirator, you are not required to have a respiratory protection program.

- Procedure for selecting a respirator
- Medical evaluations
- Fit test Procedures
- Procedures for proper use



- Procedures and schedules for cleaning, disinfecting, storing, inspecting, repairing, discarding and other maintenance

# Respiratory Protection Program

- Training in the proper use of respirators, including putting on and removing them
- Procedures for evaluating the effectiveness of the program



- Procedures to ensure adequate air quality, quantity and flow of breathing air for atmosphere supplying respirators
- Training of employees in the respiratory hazards to which they are potentially exposed during routine and emergency situations

# Fit Test Records

If a Respiratory Protection Program is required, the record of qualitative and quantitative fit test needs to be maintained for 3 years.



This record must include

- Name of employee tested
- Type of fit test
- Specific respirator tested (make, model, style and size)
- Date of test
- Pass/Fail

# Medical Supervision

Employees who regularly handle carbamate or organophosphate pesticides with the signal word “warning” or “Danger”

The following records must be retained:

1. You must keep Pesticide Use Reports for these pesticides for 3 years
2. A written agreement with a “Medical Supervisor” (A copy of this also needs to be on file at the County Ag Commissioners office)
3. Any recommendations from the “Medical Supervisor”
4. The name of the employee and the dates of when the cholinesterase (ChE) tests were performed. (Due to medical confidentiality rules, the Medical Supervisor keeps the actual test results)

Physicians who are “Medical Supervisors” must be registered with the Office of Environmental Health Hazard Assessment (OEHHA)

Organophosphate examples include:

malathion, diazinon, and chlorpyrifos, acephate, parathion, fenthion, and dichlorvos and one herbicide used strictly as a cotton defoliant, Tribufos.

Carbamate examples include:

carbaryl (Sevin), carbofuran (Furadan), aldicarb (Temik), methomyl (Lannate), propoxur and oxamyl.

Medical Supervision Program  
MEDICAL SUPERVISION WRITTEN AGREEMENT

I, \_\_\_\_\_ (Physician name), agree to provide medical supervision for the employee of \_\_\_\_\_ (Grower or Company). I possess a copy of, and am aware of the contents of, the following documents: Medical Supervision of Pesticide Workers - Guidelines for Physicians.

\_\_\_\_\_  
(Physician)  
\_\_\_\_\_  
(Address)  
\_\_\_\_\_  
(City, State, Zip)  
\_\_\_\_\_  
(Telephone)  
\_\_\_\_\_  
(Signed)

\_\_\_\_\_  
(Grower Name/Company)  
\_\_\_\_\_  
(Address)  
\_\_\_\_\_  
(City, State, Zip)  
\_\_\_\_\_  
(Telephone)  
\_\_\_\_\_  
(Signed)

Retain these records for 3 years

3CCR 6728

# Application Specific Information Display Basics

If you have employees who apply pesticides or who work in areas where pesticides have been applied, you need to display the following information:



PSIS A-8 for handlers  
PSIS A-9 for field workers

# APPLICATION-SPECIFIC INFORMATION

(Pesticide Application Information)

## Application Specific Information covering:

- Where the pesticide was applied
- Time and date of application
- Restricted Entry Interval
- Pesticide name, EPA number and active ingredients

EMERGENCY MEDICAL CARE FOR PESTICIDE ILLNESS  
HAZEL HAWKINS MEMORIAL HOSPITAL  
911 SUNSET DRIVE  
HOLLISTER, CA 95023  
(831) 637-5711

# Any Questions?

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