



ANNUAL PEST CONTROL PRODUCT USAGE REPORTING FORM FOR THE YEAR _____

Below please show where all pest control products were applied on your property this season. Feel free to use another sheet if more space is required.

*Insert course / hole map here to illustrate the locations where pest control products have been applied
or
attach a map on a separate sheet*

Please explain how maintaining IPM Accreditation with the IPM-PHC Council of Canada minimized the use of pest control products on your golf course property & how it will minimize the use in this current calendar year.

I, the undersigned Agent, verify that all submissions to the auditor are accurate and inclusive of all applications applied on our golf course for the entire season. I acknowledge that it is my responsibility to be aware of the requirements of IPM Accreditation and that I, as the Agent, follow the Code of Practice as defined by the IPM-PHC Council of Canada. I also acknowledge that failure to meet the requirements of accreditation can result in loss of privileges with the IPM-PHC Council of Canada.

IPM Agent signature: _____ Owner's representative signature: _____ Date: _____