



# ANNUAL DESK REVIEW AUDIT SUBMISSION

## 2009 CHECKLIST

Golf Course: \_\_\_\_\_

Address: \_\_\_\_\_

Postal Code: \_\_\_\_\_ Phone Number: \_\_\_\_\_

**Please note:** All the forms listed below must be signed by a Certified IPM Agent and **ALL** forms must be included in your package before it is forwarded for audit. Please do NOT send material until the package is complete.

- Annual Hot Spot Summary**
- Pest Control Product Application Forms** (for all applications made during 2009)
- Field Boom Sprayer Calibration Forms** (for three calibrations with dates)
- Backpack Sprayer Calibration Forms** (with dates)
- Daily/Weekly Scouting Reports** (for the following designated weeks)
  - Week of July 19, 2009
  - Week of Aug. 23, 2009
  - Week of Sept. 27, 2009
  - Week of Oct. 4, 2009
- Staff Training Documentation**
- Annual Report – Pest Control Product Usage**  
(this report must also be signed by owner representative)

IPM Agent name: \_\_\_\_\_ IPM Certification #: \_\_\_\_\_

IPM Agent Signature: \_\_\_\_\_ Date: \_\_\_\_\_