

University of Michigan Pesticide Audit Worksheet

Location:	Date:
Pesticide Program Manager:	
Person in Charge:	

Inventory		Yes	No	N/A
1	Inventory List Submitted to EHS			
2	Current List of Certified Applicators Submitted to EHS			
3	Restricted Use Products			
Inventory Storage Facility		Yes	No	N/A
4	800 ft. From Well			
5	Large Enough			
6	Method for Locking			
7	Identified as Pesticide Storage			
8	Properly Heated			
9	Floor Drain Contamination Prevention			
10	MSDS in Separate Location			
Inventory Containers and Labels		Yes	No	N/A
11	Labels Intact and Legible			
12	Containers in Good Condition			
13	Containers Stored in Orderly Fashion			
14	Stored Away from Food/Feed			
Strategic Operating Plan		Yes	No	N/A
15	Use Inspections and Pest Monitoring before Control Selection			
16	Non-Chemical Controls Implemented			
17	Written Plan for Off Target Drift and Notification (Outdoor use only)			
18	Plan to Hold Excess Pesticides or Rinsate for Disposal or use as a Diluent			
Impervious Pad (Hand Held Equipment Exempt)		Yes	No	N/A
19	Impervious Pad Provided			
20	Pad Bermed or Sloped			
21	Holding Tanks Above Ground			
22	Back flow Prevention for Hoses and Water Lines			
23	Shut Off Valve Where Chemicals are Mixed			
Equipment		Yes	No	N/A
24	In Sound Mechanical Condition			
25	Calibrated Properly			
26	Shut Off Valves Function Properly			

SARA Title III		Yes	No	N/A
27	Name of Person Responsible Given to Proper Authorities			
28	Applicators Aware of Whom to Notify in case of Spill			
Records		Yes	No	N/A
29	Records Kept (3 yrs. RUP, 1 yr. GUP)			
30	Applicator Records Include: Applicator name, location, date of application, identity and location of target pest, density of target pest, recommendations, amount and concentration of pesticide used, name and EPA registration number of pesticide applied.			
Safety		Yes	No	N/A
31	Respirator Use Required			
32	Applicators Current on Medical Surveillance Requirement			
33	Impervious Gloves Provided			
34	Safety Goggles Provided			
35	Spill Kit Available			
36	Contains: 2 Buckets or More, Absorptive Pillow			
37	Operator Wears Long Pants, Long Sleeves, Protective Footwear			
38	Fire Extinguisher Provided			
39	Product Labels and MSDS Available			
40	Hand Washing Facilities Available			
Notification		Yes	No	N/A
41	Application Areas Include Addresses on Notification List			
42	Appropriate Signs Provided			
43	Non-Golf course Facilities: Lawn Markers for 24 hrs, 4"x5", green letters, white background, "Caution" 11/16", "Pesticide App." 9/32", "Keep off Till Dry" 9/32", "Customer: Please Remove after 24 hrs" 3/32", Picture of No People.			
44	Golf course broadcast, foliar or space application: Date and time of application, common name of pesticide, areas treated, label re-entry precautions, name of person to be contacted for further information.			
45	Sign for public buildings: Placed at primary point of entry, posted for 24 hours, 2.5"x2.5", black letters, muted background, clouded house symbol, date of application 1/8".			

Comments	Date C'd:

Inspected by: _____ Person in Charge _____ Page _____ of _____

