

## Fresno County Department of Agriculture

(Please write legibly)

Company Name :			
First Name :			
Last Name :			
E-mail :			
Business Phone :		Home Phone :	
Permit / Operator ID # :			
Pesticide Use Report Type :	<input type="checkbox"/> Production Ag	<input type="checkbox"/> Non-Production Ag	

Owner / Operator

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

*I understand that as stated in CCR 6624 Pesticide Use Record and 6626 Pesticide Use Reports for Production Agriculture, **the owner/operator is responsible** for the timely submittal and accuracy of the pesticide use reports submitted to the sites or areas indicated on their Restricted Materials Permits or Operator Identification Number.*

**I hereby allow the indicated person(s) below to perform online use reporting on my behalf:**

Name: \_\_\_\_\_

Name : \_\_\_\_\_

Name: \_\_\_\_\_

Name : \_\_\_\_\_

Please submit this information either via fax: (559) 455-4650 or email to: [agibson@co.fresno.ca.us](mailto:agibson@co.fresno.ca.us) or mail to: Fresno County Department of Agriculture, 1730 S. Maple Ave. Fresno, Ca 93702 Attn: Angel Gibson.