

CLEANSWEEP PESTICIDE COLLECTION FORM 2014

Have you ever participated in Cleansweep before? ☐ YES ☐ NO

Business Name: _____

Contact Name: _____

Contact Phone: _____

Email Address: _____

Fax Number: _____

Address of Pesticides: _____

City/State/Zip Code: _____

County: _____

Type of Firm:

☐ Farm ☐ Nursery ☐ Golf Course ☐ Grove ☐ Other

☐ Pest Control Company

Inventory (list products for each category):

LIQUIDS (in gallons)	DRY MATERIAL (in pounds)
TOTAL Liquids:	TOTAL Dry Material: