

April 22, 2021

Dear Herbicide Applicator:

As of May 25, 2006, a new rule went into effect concerning the use of certain herbicides in Greer, Harmon, Kiowa, Jackson, and Tillman Counties. A copy of this new rule is enclosed. This rule does not prohibit the use of these herbicides. The rule lists specific herbicides by their active ingredient. You will need to look closely at the herbicides you use to determine if they apply. Your pesticide dealer or County Extension Educator can help if you are not sure. If you need to apply the regulated herbicides from May 1 through October 15th, you will need to notify the Department of Agriculture, Food and Forestry of your intent to make the application on the approved Notification form, and after the application is made then a copy of the application records will need to be sent to the Department.

NOTIFICATION OF INTENT TO USE HERBICIDE IN THE RESTRICTED AREA

Commercial Companies using this form should provide their company license number, and the certification number of the Certified Applicator, along with the name and address of the company. Farmers making their own application need to provide their Private applicators number if they have one. The name and address of the farmer / rancher for whom the application will be made needs to be filled in completely. Complete the legal description of the land to be sprayed along with the total number of acres to be sprayed. The trade name of the herbicide (as it appears on the label) being used, and the dates you intend to spray. If you are unable to spray within the fourteen days, notify the Department on the Herbicide Use Form that no application was made and send another notification.

HERBICIDE USE REPORT

Once the herbicide application has been made the Herbicide Use Report needs to be sent to the Department within seven working days. In addition to repeating the information found on the Notification form the date of application including the start and stop times need to be entered. If more than one date is needed to complete the application then all dates and times need to be listed or additional forms need to be submitted. The EPA Reg. Number and any Restricted Entry Intervals are found on the herbicide label. Dilution rate is the amount of concentrate per the number of gallons of water (i.e., 1qt per 100 gallons).

SUBMITTING THE FORMS

The forms are available on the Departments web site: <https://ag.ok.gov/pesticides/>. You can email (preferred), fax, or mail in the completed forms.

SEND TO:

Damardray Williams
ODAFF / CPS
2800 N. Lincoln Blvd.
Oklahoma City, OK 73105

damardray.williams@ag.ok.gov

Fax: (405) 522-0625

TITLE 35. OKLAHOMA DEPARTMENT OF AGRICULTURE, FOOD, AND FORESTRY
CHAPTER 30. PLANT INDUSTRY
SUBCHAPTER 17. COMBINED PESTICIDE
PART 11. STANDARDS FOR APPLICATION OF PESTICIDE

35:30-17-24.1. Restricted use areas

(a) Applications of products containing 2,4-D esters or dicamba as an active ingredient to agricultural lands shall not be made in Greer, Harmon, and Kiowa counties between 12:01 a.m. of May 1 of each calendar year through 11:59 p.m. of October 15 of each calendar year except in accordance with the provisions of this section.

(b) Applications of products containing 2,4-D, dicamba, picloram, triclopyr, or clopyralid as an active ingredient to agricultural lands shall not be made in Jackson and Tillman counties between 12:01 a.m. of May 1 of each calendar year through 11:59 p.m. of October 15 of each calendar year except in accordance with the provisions of this section.

(c) Any person intending to apply any of the herbicides listed in subsection (a) or (b) in the counties and during the times prohibited shall adhere to the following procedure:

(1) The person shall notify the Department of the intent to apply herbicides listed in subsection (a) or (b) prior to the application on a form provided by the Department.

(2) The person shall file a report with the Department on a form provided by the Department no later than seven (7) working days after the last application date provided in the original notification of the herbicide use.

(d) Failure to comply with this section shall be considered a use that is not suitable or safe.

(e) All records and notifications required by this section shall be in addition to any records required to be maintained by a commercial applicator pursuant to other rules.

(f) The provisions of this section shall not apply to applications of 2,4-DB.

NOTIFICATION OF INTENT TO USE HERBICIDES IN THE RESTRICTED AREA

COMPANY OR INDIVIDUAL MAKING APPLICATION	FARMER/RANCHER FOR WHOM THE APPLICATION WILL BE MADE
COMPANY LICENSE # _____	
CERTIFIED APPLICATOR # _____	
PRIVATE APPLICATOR # _____	
Name: _____	Name: _____
Street: _____	Street: _____
City: _____	City: _____
State: _____ Zip: _____	State: _____ Zip: _____
Phone: (_____) _____ - _____	Phone: (_____) _____ - _____

Legal Description of site to be sprayed: _____ S _____ T _____ R _____ W I.M.

Total # of Acres to be sprayed: _____

I will be applying _____
HERBICIDE(S)

between the dates of _____ and _____ (Fourteen (14) days maximum).

When the application has been made I will complete the "Herbicide Use Report" and send it to the Oklahoma Department of Agriculture, Food and Forestry within seven (7) days. If the application cannot safely be made within these projected dates I will send an "Herbicide Use Report" to the Department stating no application was made and reapply if necessary.

SIGNATURE

DATE

SEND TO:

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Oklahoma City, OK 73105

damardray.williams@ag.ok.gov

Fax: (405) 522-0625

HERBICIDE USE REPORT

**COMPANY OR INDIVIDUAL
WHO MADE THE APPLICATION**

**FARMER/RANCHER FOR WHOM THE
APPLICATION WAS MADE**

COMPANY LICENSE # _____

CERTIFIED APPLICATOR # _____

PRIVATE APPLICATOR # _____

NO APPLICATION MADE:

Name: _____

Name: _____

Street: _____

Street: _____

City: _____

City: _____

State: _____ Zip: _____

State: _____ Zip: _____

Phone: (_____) _____ - _____

Phone: (_____) _____ - _____

N

Date of Application _____ Time: Start _____ Stop _____

Target Weed(s): _____ Crop Sprayed: _____

Legal Description of site Sprayed _____ Total Acres Sprayed: _____

_____ S _____ T _____ R _____ W I.M.

Herbicide 1	Herbicide 2	Herbicide 3
Trade Name:	Trade Name:	Trade Name:
EPA Reg. #	EPA Reg. #	EPA Reg. #
Rate per Acre:	Rate per Acre:	Rate per Acre:
Total Concentrate Used:	Total Concentrate Used:	Total Concentrate Used:
Dilution Rate Used:	Dilution Rate Used:	Dilution Rate Used:
Restricted Entry Interval:	Restricted Entry Interval:	Restricted Entry Interval:

Total Tank Mix used: _____ Gallons

SEND TO:

Damardray Williams
ODAFF / CPS
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Oklahoma City, OK 73105
damardray.williams@ag.ok.gov
Fax (405) 522-0625

This is a true and accurate record of the herbicide application.

SIGNATURE

DATE