



RESTRICTED USE PESTICIDE SALES RECORD

Dealer Name: _____ License Number: _____
 Address: _____ Business Name: _____
 City, State, Zip: _____

Date of Sale	Purchaser's Name	Purchaser's Address	Pesticide Company Name	Pesticide Trade Name	Volume Sold (lbs or gals)
	License/Permit No.			EPA Reg. No. and/or SLN No.	

Instructions: This record will satisfy minimum requirements of 4.10.504 Administrative Rules of Montana and Title 40 Code of Federal Regulations 171.12 for sales of restricted use pesticides. The record must be filled out for each sale of a restricted use pesticide. Sales of restricted use pesticides shall be made only to certified applicators in possession of valid licenses or permits issued by the Montana Department of Agriculture. Prior to making a sale of a restricted use pesticide, dealers are required to confirm this by viewing the purchaser's license or permit. For questions about this form or other pesticide matters, contact the Montana Department of Agriculture, Agricultural Sciences Division, Helena, MT (406)444-3144.