## 1. PARTICIPANT INFORMATION:

- a. Name:
- b. Address:
- c. Community and County:
- d. Contact Information:

## 2. AG WASTE ITEMS TO BE DISPOSED OF AT COLLECTION DAY:

Pesticides Liquids, Quantity: Pesticides Liquids, Quantity: Size of Tote(s):gallon	(No. of 1.0, 2.0 or 2.5 g containers) (No. of totes)
Pesticides Liquids, Quantity: Size of Container: gallo	(No. of 55g, 30g, other) on
Pesticides Solids, Quantity: Size of Container:	(No. of containers/bags)

Please list by name pesticides you are bringing to collection day:

## 3. <u>DO YOU HAVE EMPTY PESTICIDE CONTAINERS YOU ARE NEEDING TO DISPOSE OF?</u> IF SO, WHAT SIZE <u>CONTAINERS DO YOU HAVE?</u> [Please indicate the number/quantity you have]

Small 1g, 2.0 or 2.5 g plastic containers	(number/quantity)
5g plastic	
55g drums	
Totes	

NOTE: EMPTY PESTICIDE CONTAINERS WILL BE ACCEPTED THE DAY OF THE EVENT. ALL CONTAINERS MUST BE TRIPLE RINSED BEFORE THEY ARE BROUGHT TO THE COLLECTION SITE. CONTAINERS MUST HAVE THE PAPER LABELS AND CAPS REMOVED. CONTAINERS THAT ARE NOT PROPERLY RINSED WILL NOT BE ACCEPTED.

Official Time Stamp Date: Time: