

FIELD ID FORM

(Please fill out a separate form for each field)

(Make copies as needed)

Applicant Name: _____

Field Name or No: _____ County _____ No. of Acres _____

Describe field location (ie. Highway 67, 1 mile south of Jacksonville): _____

GPS Reading of the primary entrance to this field *(please provide in decimal degrees)*:

Latitude: _____ Longitude: _____

How will application be made: Ground Air

Describe in detail (other than cost) why 2,4-D alternatives will not be practical at this location:

**** PLEASE SUBMIT RECORDS TO pesticide.hardshippermits@arkansas.gov ****