

Agricultural and Veterinary Chemicals (Control of Use) Act 1995

**APPLICATION FOR AN AGRICULTURAL SPRAYING PERMIT TO USE
2,4-D DURING THE PERIOD FROM 15 SEPTEMBER TO 15 APRIL**

Return this form to:

Stuart Bowman
Chemicals Coordinator
AgVet Chemicals Program, Product Integrity Branch
PO Box 46, Kings Meadows TAS 7249

Enquiries:

Phone: (03) 6777 2133, Fax (03) 6343 2833
Email: Stuart.Bowman@dpiwve.tas.gov.au
Web: www.dpiwve.tas.gov.au/chemicals
Phone: 1300 368 550

Applicant

Given names: _____

Family name _____ Date of Birth: ____/____/____

Residential Address: _____

Postal Address: _____

Contact Nos: After Hours: _____ Business: _____

Mobile: _____ Fax: _____

Email: _____

Name of person who will be applying 2,4-D

Is this person: (tick) Employed on the Property OR An Agricultural Spraying Contractor

Location(s) of proposed use of 2,4-D (Name of property, address, map grid references):

Note: A sketched or copied map of location can be included

Distance from nearest:	Vineyard	_____ km	Orchard	_____ km
	Plant Nursery	_____ km	Hop Field	_____ km
	Vegetables/Market Garden	_____ km	Poppies	_____ km

Crop/situation to be treated: _____

Target weeds: _____

Area to be treated (hectares): _____

Trade name of product to be used: _____

Application rate (L/ha): _____

Anticipated date(s) or use: _____

APPLICATION FOR AN AGRICULTURAL SPRAYING PERMIT TO USE 2,4-D

Method of Application (tick method(s) to be used)

- | | |
|------------------------------------|---|
| <input type="checkbox"/> Aircraft | <input type="checkbox"/> Wiper Applicator |
| <input type="checkbox"/> Boomspray | <input type="checkbox"/> High Volume Spot |
| <input type="checkbox"/> CDA | <input type="checkbox"/> Knapsack |

Other (specify): _____

Nozzle details (e.g. TeeJet XR Flat Fan 110-02, HardiLowDrift ISO LD 110-04)

Intended operating pressure (psi, bar or kPa)

Intended water Volume (Litres per ha)

Additional Comments:

I, the applicant named above, wish to apply for an **Agricultural Spraying Permit To Use 2,4-D**.
In making this application I declare that the information provided is accurate.

Signature: _____

Date: ____/____/____

OFFICE USE ONLY

Application form completed correctly Yes No Date received: _____

Queries/deficiencies/archiving _____

RECOMMENDATION

ISSUE PERMIT YES NO FOR USE BETWEEN: _____

COMMENTS: _____

RESTRICTIONS: _____

Signature: _____

Date: ____/____/____

Privacy Statement

Personal information will be collected from you for the purpose of granting a 2,4-D spraying permit. This information will be used by DPIPWE for determining the relevant application and may be used for other purposes permitted by the *Agricultural and Veterinary Chemicals (Control of Use) Act 1995*. Failure to provide this information may result in your application not being able to be processed.

Your personal information will be used for the primary purpose for which it is collected, and may be disclosed to courts and other agencies authorised to collect it. Your basic personal information may also be disclosed to other public sector bodies where necessary for the efficient storage and use of the information. Personal information will be managed in accordance with the *Personal Information Protection Act 2004* and may be accessed by the individual to whom it relates on request to DPIPWE. You may be charged a fee for this service.