## Application Detail for Clomazone

To be filled in by Adama advisor.
Company:
Depot address:
Client name:
Client telephone:
Home:
Mobile:
Office:

Office: Address:

## Field name:

Cropping: Agronomist name:

BASIS no:

Agronomist telephone:

Home:
Mobile:
Office:

Field Reference (OS Grid or Long/Lat):

Field Size (ha):

## Current:

Variety:

Previous:
Following:

Weeds present at application:

Soil type:

## ADAMA



To be filled in by Adama advisor and/or spray operator.

Product
Clomazone
Rate
L/KG/HAw
Partner product(s):
Clomazone Rate
Partner products and rates

Date of application:
Time of application:
Water volume (L/Ha):
Nozzle type:

## Pressure:

## Sprayer details:

Manufacturer/Model<br>Boom width<br>Boom Height<br>Forward speed<br>Last MOT (Date)

## Weather Data

Pre application:
Approximate details of weather conditions in the 7 days before application
During application: $\quad$ Temperature $\quad$ Wind speed $\quad$ Wind direction

Post application:
Approximate details of weather conditions in the 14 days following application

## Planting and Emergence

## Cultivations:

Planting date \&
emergence date:
Seed depth:
Germination stage
of application:
Seedbed condition:
Firm/cobbly/dry/wet/rolled/ other comments

## ADAMA

