

Montana Ag Safety Program



Chemical Safety Work Plan

BRAND NAME: _____

RESTRICTED? YES NO

EPA Registration Number: _____

ACTIVE INGREDIENT:

- | | |
|--|--|
| <input type="checkbox"/> Glyphosate | <input type="checkbox"/> Strychnine |
| <input type="checkbox"/> Aluminum/zinc phosphide | <input type="checkbox"/> Paraquat/diquat |
| <input type="checkbox"/> Organophosphates | <input type="checkbox"/> Cresol |
| <input type="checkbox"/> Pyrethroids | <input type="checkbox"/> Alkaline/acid cleaning agents |
| <input type="checkbox"/> Methyl bromide | <input type="checkbox"/> Neonicotinoids |
| <input type="checkbox"/> Sodium fluoroacetate | <input type="checkbox"/> Formalin |
| <input type="checkbox"/> Other: _____ | |

PPE REQUIRED: MIXING, LOADING, CLEANING *READ THE LABEL*

- | | | | |
|---------------------------------------|--|----------------------|--|
| LONG PANTS | <input type="checkbox"/> YES <input type="checkbox"/> NO | APPROPRIATE FOOTWEAR | <input type="checkbox"/> YES <input type="checkbox"/> NO |
| LONG SLEEVE SHIRT | <input type="checkbox"/> YES <input type="checkbox"/> NO | GLOVES | <input type="checkbox"/> YES <input type="checkbox"/> NO |
| EYE PROTECTION | <input type="checkbox"/> YES <input type="checkbox"/> NO | RESPIRATOR/MASK | <input type="checkbox"/> YES <input type="checkbox"/> NO |
| <input type="checkbox"/> Other: _____ | | | |

PPE REQUIRED: APPLICATION AND HANDLING *READ THE LABEL*

- | | | | |
|---------------------------------------|--|----------------------|--|
| LONG PANTS | <input type="checkbox"/> YES <input type="checkbox"/> NO | APPROPRIATE FOOTWEAR | <input type="checkbox"/> YES <input type="checkbox"/> NO |
| LONG SLEEVE SHIRT | <input type="checkbox"/> YES <input type="checkbox"/> NO | GLOVES | <input type="checkbox"/> YES <input type="checkbox"/> NO |
| EYE PROTECTION | <input type="checkbox"/> YES <input type="checkbox"/> NO | RESPIRATOR/MASK | <input type="checkbox"/> YES <input type="checkbox"/> NO |
| <input type="checkbox"/> Other: _____ | | | |

CONTAMINATED CLOTHING? CLEAN **OR** DISPOSE

RE-ENTRY TIME: _____

ADDITIONAL INSTRUCTIONS: _____

CLEAN UP: _____

FOR SPECIFIC SPRAYING INSTRUCTIONS *READ THE LABEL*

The label is the law!

Montana Ag Safety Program

Form: 2022-CSWP