

REPUBLIC OF THE PHILIPPINES DEPARTMENT OF AGRICULTURE FERTILIZER AND PESTICIDE AUTHORITY

FPA Bldg. B.A.I. Compound Visayas Ave. Diliman, Quezon City P.O. Box 2582, Q.C. Tel. Nos. 8920-8573 (PMID), 8922-3368 (PRD), 8441-1601 (FRD) E-mail add: fpacentral77@gmail.com] Website: http://fpa.da.gov.ph

January 28, 2020

MEMORANDUM CIRCULAR 05

TO : REGIONAL FIELD UNITS (RFUs),

FERTILIZER AND PESTICIDE INDUSTRY AND

STAKEHOLDERS

SUBJECT : USE OF THE PESTICIDE SPRAYING REPORT FORM

In line with the mandate of this Office as provided in Presidential Decree (P.D.) No. 1144, in protecting the public from the inherent risks with improper pesticide usage to the users, handlers and the environment, and pursuant to Section 6, Part III, Paragraphs 1 and 2 of P.D. 1144, FPA has the authority to determine specific uses and manner of use of pesticides or pesticide formulations and to establish and enforce tolerance levels and good agricultural practices for use of pesticides in raw agricultural contaminants, please be informed that the enclosed form, **FPA-FOCU-F5**, will be utilized as the official Pesticide Spraying Report Form of our Regional Field Personnel in their monthly monitoring of pesticide spraying in plantations.

Please be reminded that this covers the use of Remotely Piloted Aircraft System (RPAS) referring to the issuance of FPA Memorandum Circular No. 28, s-2018 regarding the Good Agricultural Practices for RPAS for Use as Spraying.

This Memorandum Circular shall take effect January 28, 2020.

For your guidance and strict compliance.

WILFREDO C. ROLDAN
Executive Director

Cc: DEDF, DEDP, FOCU





MONTHLY MONITORING AND VALIDATION REPORT OF PESTICIDE SPRAYING IN PLANTATIONS

For the month of _____

Boom	_	
Aerial	Drone	
	Aircraft	

BUSINESS ADDRESS : _____

NAME OF COMPANY/PLANTATION: ___

SERVICE PROVIDER:												
APPLIED	(HAS.):_								r		· ·	
Time of Application		Name of Pilot/ Boom Truck Operator		intellillow, larger riow,		Area Covered	Volume Used (li.)		Name of Mixers/Crew	Mixing Ratio (%)	Name of CPA/ARCO Assigned	PPE's Used
Time				etc.)		(nas.)						
									100 mm m			
	Time	Time of Application	Time of Application Time Time Time Time	Time of Application Name of Pilot/ Aircraft/Boom Truck Boom Truck Operator Identification	Time of Application Name of Pilot/ Aircraft/Boom Truck Identification Plane of Pilot/ Identif	Time of Application Name of Pilot/ Boom Truck Operator Identification Park Intelliflow, Target Flow, etc.) Name of Pilot/ Identification Park Intelliflow, Target Flow, etc.)	Time of Application Name of Pilot/ Boom Truck Operator Identification Name of Pilot/ Boom Truck Operator Identification Power of Pilot/ Identification Power of Pilot/ Identification Power of Pilot/ Identification Power of Pilot/ Intelliflow, Target Flow, etc.) Navigation Device (GPS, Intelliflow, Target Flow, etc.)	Time of Application Name of Pilot/ Boom Truck Operator Identification Name of Pilot/ Boom Truck Operator Identification Name of Pilot/ Boom Truck Operator Identification etc.) Navigation Device (GPS, Intelliflow, Target Flow, etc.) Farm Location Covered (has.)	Time of Application Name of Pilot/ Boom Truck Operator Identification Navigation Device (GPS, Intelliflow, Target Flow, etc.) Navigation Device (GPS, Intelliflow, Target Flow, etc.) Farm Location Covered (has.) Volume Used (li.) Volume Used (li.)	Time of Application Name of Pilot/ Boom Truck Operator Time I Time Time Time Time Time Time Name of Pilot/ Boom Truck Operator Time Time Time Time Time Time Time Time	Time of Application Name of Pilot/Boom Truck Operator Identification Time Time Ime	Time of Application Name of Pilot/Boom Truck Operator Time Ime Time Time Time Time Time Time Name of Pilot/Boom Truck Operator Device (GPS, Intelliflow, Target Flow, etc.) Navigation Device (GPS, Intelliflow, Target Flow, etc.) Farm Location Area Covered (has.) Volume Fungicides Used (li.) Used Mixers/Crew Ratio (%) Name of CPA/ARCO Assigned

Effective Date: 28 January 2020

Prepared and Submitted by:

Regional Officer

Revision: 00

Date

1.	Coordination to LGUs (Barangay, Schools, etc.)										
	Date of information/Dissemination :										
	Methodology (e.g.letter, notice):										
	Person Coordinated :										
	Safety Compliance										
	a. Availability of MSDS										
	b. Buffer Zone (meters										
	c. Signages/ Warning Signs:										
	d. Altitude (height above canopy):										
	e. Wind Velocity:	e. Wind Velocity:									
	f. Temperature										
	g. Swath width (meter)										
III.	Post Application										
	a. Rinsing of aircraft, spray equipment & pesticide containers	Yes	No	if no: (why)							
	b. Rinsate containment available	Yes	No	if no: (why)							
	c. Disposal of Rinsate	Yes	No	if no: (why)							
IV.	Ground Validation										
	a. Community (issues/concerns after spraying) if any:										
	b. within plantation premises:										
	c. Problems encountered (if any):m										
٧.	Attach the Aerial Spray Final Report (ASFR) and other information.	refer to FPA MC No.0	2, Series of 20	09)							
Sub	bmitted by:		Noted by:								
	gnature over Printed Name)		(Signature ov								
Res	sponsible Person/Position		Plantation Head								
Dat	te:		Date:								

Note: Must be submitted to FPA Central/Regional Office in a quarterly basis..