

H2Ohio Recordkeeping Guide

Date: _____

Field: _____

Acres applied: _____

Application Rate: _____

Total nutrients applied by weight/volume: _____

Analysis of nutrients applied: _____

Type of application: _____

Name of Applicator: _____

Name of certificate holder, if applicable: _____

Soil conditions at time of application: _____

Weather conditions at time of application: _____

Weather forecast for following day: _____

***can be printed at weather.gov

For surface applications: Is the ground **FROZEN** or **SNOW COVERED**?

yes

no

For questions, please contact Wood SWCD at 419-354-5517 ext. 4



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