

State of Hawaii
DEPARTMENT OF AGRICULTURE
Division of Plant Industry
1428 S. King Street
Honolulu, HI 96814-2512

**APPLICATION FOR PERMISSION TO APPLY A RESTRICTED USE
PESTICIDE BY AIRCRAFT**

Name of applicant: David Smith Title: Administrator

Business name and address: Hawaii Department of Land and Natural Resources,

Division of Forestry and Wildlife Telephone: 808-587-0166

Purpose of aerial treatment (specify site(s) and pest problem): Eradication of rats from Lehua Island

Tentative date(s) of application: 8/24, 8/31, and 9/9 2017

Pesticide formulation to be applied (include EPA Reg. No. (s)): 12455-147

Dosage or rate of application: 27 lbs./acre

Method of application (check one): Fixed Wing Helicopter

Specific location of mixing and loading site(s): Loading site will be on Niihau island

Flight path of aircraft to treatment area: The helicopter will carry the bait product across the
channel between Niihau and Lehua. Bait will only be broadcast over Lehua (treatment area)

Method or means of determining wind direction and wind speed at application site: _____

Wind speed will be measured with an anemometer and wind direction with a wind indicator and com

Method of notifying pilot when ground conditions become impractical for further pesticide application:

Pilots will be in direct contact via radio with an Air Operations Officer on the ground that will inform p

Approximate height of spraying (in feet): 300 ft

Type of application equipment, spray nozzles, orifice size/diameter, etc.: underslung spreader bucket
the aperture of the disk will be determined by calibration with a non-toxic formulation of bait

Type of drift suppressant or foaming agents to be used: not applicable, drift suppressant or foaming
agent not necessary with this bait type

Safety equipment and protective clothing to be worn by:

Pilot: nomex coveralls, flight helmet, long sleeved shirt, long pants, gloves, shoes
plus socks.

Ground crew: (bait loaders) eye protection, ear protection, respirator, nomex coveralls,
steel toe boots, plus socks, leather gloves, long sleeved shirt and long pants.

Flagman: eye protection, ear protection, respirator, nomex coveralls, steel toe boots
plus socks, gloves, long sleeved shirt and long pants.

Other workers: long sleeved shirt and long pants, gloves, close toed shoes plus socks

Attach a map of the proposed site(s) to be treated, loading and mixing areas, flight path from loading area to field, general wind direction, surrounding roadways, waterways, homes, schools, or other crop plantings in the vicinity.

Provide the name, title and certification number of the ground supervisor and the pilot (one person **MUST** be certified in Category 4 (Aerial Pest Control) and both lines **MUST** be completed).

Ground Supervisor:	[Redacted]	Niihau Ground Supervisor	[Redacted]
	Name (Print)	Title	Cert. No. / Category

Pilot:	[Redacted]	Baiting Pilot	[Redacted]
	Name (Print)	Title	Cert. No. / Category

The applicant agrees to indemnify and hold harmless the State of Hawaii, the Department of Agriculture, and all of their officers, agents and employees against any loss, claim or liability arising out of or in anyway connected with such pesticide operations covered under this application.

The undersigned further understands that issuance of a permit by the Department of Agriculture under this application shall not be construed as relieving the permittee from liability for any damage caused by such use to the lives and property of others.

David Smith
Name of Applicant (Print)


Signature of Applicant

8/11/17
Date