

Sealed silo fumigation record

Supervisor's details (if applicable): _____

Applicator's details: _____

Name and location of fumigated silo: _____

Contents and approximate tonnage: _____

Pest ID/date found	Half-life press test	Silo capacity (m ³ or tonnes of wheat when full)	Treatment product information				Fumigation			Ventilation		Withholding period (days)	Date of treatment residues removal	Date(s) of follow up inspection for insects
	Time for 25-12.5 mm drop in relief valve fluid levels		Treatment product/type (tablets, bag chains, etc.)	Application method/location	Grain temperature (°C)	Dose/treatment quantity applied	Start date	Monitoring of fumigation levels (date/time/result (ppm))	End date	Ventilation type (natural or forced aeration)	Start date/end date			