

Requirements for Forest Canopy Insect Pest Control Checklist

Pesticide NPDES Permit Program

National Pollutant Discharge Elimination System (NPDES)

Doc Type: Permitting Checklist

Instructions: This checklist provides a summary of permit requirements – be sure to read your permit for complete details and responsibilities. Consider printing this page and using it as an easy-reference checklist.

Useful information is available: See U. S. Environmental Protection Agency's (EPA) *Final Pesticide Permit Fact Sheet* at http://www.epa.gov/npdes/pubs/pgp_final_factsheet.pdf for control measure designs and case studies.

If you are treating for forest canopy pests and are required to submit a Notice of Intent [refer to Step 2 on the Minnesota Pollution Control Agency (MPCA) website at http://www.pca.state.mn.us/mvric7f], you must meet the following requirements:

| 1) | Ider | ntify the Problem | | | | |
|----|--------------------------------------|---|--|--|--|--|
| , | Prior | to the first pesticide application and at least once each calendar year during which you will have a discharge, you must do Illowing for each pest management area. | | | | |
| | | Establish pest densities that will serve as action thresholds. Action thresholds help determine the need and proper time for action. | | | | |
| | | Identify target pests and develop species-specific control methods. | | | | |
| | | Identify current distribution of the target pest and estimate potential distribution in the absence of control measures. | | | | |
| | | If there are no data for your pest management area in the past calendar year, use other available data as appropr meet the above conditions. | | | | |
| 2) | Eval | luate Pest Management Strategies and Minimize Discharges | | | | |
| | | Implement control measures that minimize or eliminate discharges of pesticides in, over, or near waters of the state. See pages 87-92 of the EPA's Final Permit Fact Sheet for control measure designs and case studies. Consider pesticide and non-pesticide management options such as: | | | | |
| | | - No action | | | | |
| | | Prevention | | | | |
| | | Cultural methods (ex: making habitat unsuitable, maintain the health of trees, etc.) | | | | |
| | | Mechanical/physical methods (ex: egg mass removal) | | | | |
| | | Biological control (ex: introduction/enhancement of diseases, predators or parasites, sterile insect release, mating disruption, etc.) | | | | |
| | | · Pesticides | | | | |
| | | Use the lowest effective amount of pesticides and application frequency needed to control the pest while remaining in compliance with the label. | | | | |
| | | Use appropriate pest management measures, such as manufacturer's specifications, industry standards, recommended industry practices, and other prudent provisions to control the pest and minimize the discharge. | | | | |
| 3) | 3) Follow Pesticide Use Requirements | | | | | |
| | If a po | esticide is selected for managing forest canopy pests, you must: | | | | |
| | | Reduce the impact on the environment by applying the pesticide only when the action threshold has been met. | | | | |
| | | Conduct surveillance of the pest management area before each pesticide application to determine when action thresholds have been met. | | | | |
| | | Identify conditions that support pest breeding and are suitable for control activities by assessing environmental conditions before each pesticide application (e.g., temperature, and wind speed and direction). | | | | |
| | | Consider using larvicides as the primary pesticide. | | | | |

Use adulticides only when the adult action threshold has been met

| 4) | Report Adverse Incidents | | | | |
|----|--|---|--|--|--|
| | Refer to Step 6 on the MPCA website at http://www.pca.state.mn.us/zihyc83 for more detailed reporting information. aware or are made aware of an Adverse Incident – such as distressed or dead plants or animals – which may be the your pesticide application, you must: | | | | |
| | | Immediately notify the Minnesota Duty Officer at 651-649-5451 or 800-422-0798. | | | |
| | | Submit an <i>Adverse Incident Report</i> within 15 days. The MPCA has developed an <i>Adverse Incident Report</i> form for you to use (found on the MPCA website at http://www.pca.state.mn.us/publications/wq-wwprm9-02.doc). | | | |
| | | If you determine that the adverse incident was not a result of your pesticide application, submit a justification letter or email to the MPCA within 15 days. | | | |
| | | Note: These Adverse Incident reporting requirements are in addition to those required by Federal Insecticide, Fungicide, and Rodenticide Act. | | | |
| 5) | Kee | p Records | | | |
| | withir | nust keep the following records at the address submitted on the Notice of Intent. The information must be documented a 15 days of pesticide application and must be retained for five years. An asterisk indicates information that is also required Annual Report (refer to Step 7 on the MPCA website at http://www.pca.state.mn.us/qzqhc84). | | | |
| | | A copy of the Notice of Intent submitted to the MPCA. | | | |
| | | Your assigned permit tracking number.* | | | |
| | | Any correspondence exchanged between you and the MPCA. | | | |
| | | Records of the acres treated to demonstrate if your discharge exceeds the Threshold. | | | |
| | | A copy of any Adverse Incident Reports* | | | |
| | | Rationale for any determination that reporting of an Adverse Incident was not required. | | | |
| | | Target pests identified.* | | | |
| | | Pest density prior to pesticide application. | | | |
| | | Water bodies, either by name or by location, to which you discharged pesticides. Consider recording latitude and longitude, too, since it is required on the Annual Report.* | | | |
| | | Quantity of each pesticide product applied to each treatment area. | | | |
| | | Whether visual monitoring is conducted and if not, why not. | | | |
| | | Any unusual or unexpected effects on non-target organisms. | | | |
| | | Documentation of equipment cleaning, calibration, and repair (only if Decision-maker is also the Applicator). | | | |
| | | ollowing records kept by the applicator are required by the Minnesota Department of Agriculture and by this permit. If cation is done by a for-hire applicator, the applicator is required to give you a copy of the records. | | | |
| | | Name of applicator (individual and company), including license number and company address. | | | |
| | | Pesticide application dates and times. | | | |
| | | Brand name of the pesticide, the United States Environmental Protection Agency registration number, and dosage used.* | | | |
| | | Location of the site where the pesticide was applied.* | | | |
| | | Number of units treated, such as acres.* | | | |
| | | Temperature, wind speed, and wind direction at time of each pesticide application. | | | |
| | | *Also required in the Annual Report (refer to Step 7 on the MPCA website at http://www.pca.state.mn.us/qzqhc84). | | | |
| | Large | Entities, defined as public entities that serve a population of greater than 10,000 or private enterprises that exceed the | | | |

www.pca.state.mn.us • 651-296-6300 • 800-657-3864 • TTY 651-282-5332 or 800-657-3864 • Available in alternative formats wq-wwprm9-05c • 11/18/11 Page 2 of 3

Small Business Administration size standard, must keep the following additional records:

Methods and/or data used to determine that the Action Thresholds have been met.

☐ A copy of your Annual Reports submitted to the MPCA.

Action Thresholds.

A copy of your Pesticide Discharge Management Plan (PDMP), including any modifications made.

Documentation of any changes made and corrective action taken (see below for more information).

6) Make Changes

| If any of the following situations occur, | make changes to ensure | the situation is elimina | ated and will not be | e repeated in the |
|---|------------------------|--------------------------|----------------------|-------------------|
| future: | | | | |

- You discover you are using more pesticides than necessary or are applying them more often than needed to control the pest.
- Your equipment is not being maintained regularly (applies to Applicators only).
- · You report an Adverse Incident.
- A spill or leak occurs.
- You become aware, or MPCA concludes, that your control measures are not sufficient for the discharge to meet applicable water quality standards.
- An inspection or evaluation of your activities reveals that changes are necessary

Within 15 days of becoming aware of the situation, document the situation and the planned corrective action. Documentation must include the following information.

| mack molecular for following information: | | | | |
|---|---|--|--|--|
| | Date the problem was identified. | | | |
| | Brief description of the situation that triggered the need for corrective action. | | | |
| | Brief description of how the problem was identified, how you learned of the situation, and date you learned of the situation. | | | |
| | Summary of corrective action taken including date started and date finished or expected to be finished. | | | |
| | Measures taken to prevent reoccurrence of such a problem, including whether changes were made to the PDMP as a result of the problem (applies to Large Entities only) | | | |
| | If the discharge did not meet Water Quality Standards, include any ambient monitoring results that were used to make this determination. | | | |

7) Requirements for Large Entities that Exceed the Threshold(s).

Refer to Step 5 on the MPCA website at http://www.pca.state.mn.us/wfhyc82.

www.pca.state.mn.us • 651-296-6300 • 800-657-3864 • TTY 651-282-5332 or 800-657-3864 • Available in alternative formats wq-wwprm9-05c • 11/18/11