

Santa Barbara County Agricultural Commissioner's Office

PESTICIDE COMPLAINT REPORT NARRATIVE (PCR)

Incident Date: 3/2/17 Report ID: PCR 4 SJ Custom Farming 3-2-17 concern about drift

AGRICULTURAL COMMISSIONER'S OFFICE

Pesticide Investigation Cover Sheet

Please investigate this incident. When your investigation is complete, send your report and this form to your supervisor.

Investigation Title: (PEIR/PCR) **PCR 4 SJ Custom Farming 3-2-17 concern about drift**

Biologist: Harriet Heath

Initiate Date (w/in 2 days): 3/2/17

Completion Target Dates:

(Draft w/in 30 days): 4/2/17

(Final w/in 60 days): 6/2/17

Does this investigation involve: Over-tolerance (OT) Ag/Urban Interface ?

Biologist Hours 6 Supervisor/Manager Hours 2

DO NOT RELEASE MEDICAL INFORMATION

The medical information contained in complaints and investigations is confidential. This includes the information contained in the Doctor's First Report. This information is not subject to the California Public Records Act and therefore cannot be released to any person, employer or entity except by subpoena. An exception to this is the Department of Pesticide Regulation. Please be sure to use the updated Medical Release Authorization form (revision date 2/04) when conducting investigations. If you have any questions, please talk to your supervisor or a manager.

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Summary

, a staff member of Midland School (a private school) called the Santa Barbara County Agricultural Commissioner's Office, (SBCAC) on March 2, 2017 to report concerns relating to the new school regulations and to proactively prevent any possible pesticide drifts from occurring onto the Midland School grounds when [REDACTED] sprays the block next to the school. [REDACTED] was under the incorrect assumption that the new proposed regulations relating to schools had been implemented into regulation.

Background

[REDACTED] (SJ Custom Farming) sprayed broadleaf herbicides on wheat on 2/28/17 and the application was inspected by H HEATH. The inspection took place at 9am, and was in compliance with all regulations, conditions and label requirements. Amine 4, 2,4-D (EPA Reg. # 34704-120), Rifle (EPA Reg. # 34704-861) and LI700 (EPA Reg. # 34704-50035) were the products applied. These are the same products that were used last year on 3/10/16 when SBCAC sampled for drift on an application made by [REDACTED] which laboratory results showed no pesticides detected for the Midland School grounds property. [REDACTED] was concerned about the possibility of drift.

Violations

None

Witnesses

NAME/Title	ADDRESS	EMPLOYER	TELEPHONE
[REDACTED]	PO Box 8 Los Olivos, CA 93441	Midland School	
[REDACTED]	PO Box 91, Solvang, CA 93463	SJ Custom Farming	
Harriet Heath / Agricultural Biologist	263 Camino del Remedio, Santa Barbara, CA 93110	SB Ag Commissioner	(805) 681-5600

Investigation and Statements Information

called to report that [REDACTED] was spraying just south of the school and was working his way towards Midland School. [REDACTED] was concerned that the new school regulations had changed and that they were not going to be met.

I inspected [REDACTED] on 2/28/17 and there were no non-compliances. We discussed the application equipment, wind conditions. Additionally, we discussed the schools concern of a drift possibility and possibilities of the applicator using a different herbicide for the blocks closest to the school than from previous years. [REDACTED] agreed to use non-restricted pesticides and add a drift retardant to reduce the likelihood of drift. I monitored the

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application on 3/9/17 and there were no non-compliances noted. The wind (2-4 MPH north east to south west), was blowing away from the school during the application time period.

The CAC has a note in the file of SJ Custom Farming's permit to ensure that this sensitive sight next to the Midland School grounds is addressed each year while renewing the permit.

Findings

The School reported no drift symptoms on any plant material for the 2017 applications. The SBCAC informed Midland School the new regulations were currently in the comment phase and not adopted as regulation at this time. SJ Custom Farming has a note in the permit file to make sure that this sensitive sight is addressed each year during permit renewal.

Attachments

Pesticide Use Monitoring Inspection Reports 2/28/17 10104-850289 and 3/9/17 104-850291

Report Prepared By	Date	Report Reviewed By	Date
Harriet Heath	8/1/17		

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Phenoxy application inspection sheet that propted the concern:

STATE OF CALIFORNIA
DEPARTMENT OF PESTICIDE REGULATION
PESTICIDE USE
MONITORING INSPECTION REPORT
PR-ENF-104 (REV. 01/10) Page 1 of 1

COMPLETE
 PARTIAL
 FOLLOW-UP INSPECTION
ORIGINAL INSP. # _____

104- 850289

Santa Barbara
INSPECTING COUNTY

FIRM / PERSON INSPECTED <i>SJ Custom Farming</i>			FIRM MAILING ADDRESS <i>PO Box 91 Solvang CA 93444</i>		
PROPERTY OPERATOR [REDACTED]	SUPERVISOR <i>none</i>	INTERVIEWED <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	BUSINESS TYPE <input checked="" type="checkbox"/> Property Operator	PERMIT / OPERATOR ID # <i>12-17-4204079</i>	<input type="checkbox"/> N/R <input type="checkbox"/> UNL
PROPERTY EQUIPMENT TYPE <i>07 Chamberlain Pk 4155 Figueroa - Mt Rd</i>			BUSINESS LICENSE # _____		
ADJACENT ENVIRONMENT W <i>Range</i> N <i>wheat</i> E <i>Road</i>			TREATMENT AREA S <i>wheat</i>		
HANDLER'S NAME / # INTERVIEWED [REDACTED]			ACTIVITY <i>applicator</i>		
PERSONAL PROTECTIVE EQUIPMENT WORN <i>typical coveralls, goggle Resp, chem gloves, rubber boots 2 long sleeves long pants</i>					

PESTICIDE NAME / MANUFACTURER	LABEL REGISTRATION NUMBER	SIGNAL WORD	FORMULATION	RATE	DILUTION
<i>Loveland - Aminol 2.4D</i>	<i>34704-120</i>	<i>Danger</i>	<i>liq</i>	<i>1 1/2 pt/A</i>	<i>20 gal</i>
<i>Loveland - Rifle</i>	<i>34704-361</i>	<i>Warning</i>	<i>liq</i>	<i>3 1/2 pt/A</i>	<i>20 gal</i>
<i>Loveland - JIF 700</i>	<i>34704-5035</i>	<i>Danger</i>	<i>liq</i>	<i>1 1/2 pt/A</i>	<i>20 gal</i>

A. APPLICATION				B. MIX/LOAD				A. APPLICATION				B. MIX/LOAD			
COMPLIANCE		REQUIREMENTS	Section	COMPLIANCE		REQUIREMENTS, (Continued)	Section	COMPLIANCE		REQUIREMENTS, (Continued)	Section	COMPLIANCE			
YES	N/A			YES	NO			YES	NO			YES	NO	YES	NO
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	1. PCB Licensed	11701	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	19. Closed Sys. Used /Criteria - "Danger"	6746	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	20. Protect. of Persons/Animals/Property	6614	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	2. PCB Registered in County	11732	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	21. Equipment Registered - PCB	11732	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	22. Equipment Identified - PCB	6630	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	3. Labeling Available at Use Site	6602	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	23. Backflow Prevention - Airgap	6610	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	24. Containers Secured / Attended	6670	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	4. Notice of Intent Submitted	6434	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	25. Containers Labeled / Closures	6676	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	26. Service Container Labeling	6678	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	5. Certified Applicator Sup RM	6406	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	27. Proper Containers	6680	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	28. Proper Pesticide Transport	6682	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	6. Complies w/Permit Conditions	12973	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	29. Containers Properly Rinsed	6684	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	30. Accurate Measurement	6604	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	7. Labeling - Site/Rate/Other	12973	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	31. Ground Water Protection	6487.1-5	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	32. Wellhead Protection	6609	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	8. Labeling - PPE	12973	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	33. Dormant Insecticides	6960	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	34. <i>surface water</i>		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	9. Regulations - PPE	6738	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	TOTAL		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	TOTAL		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	10. Respiratory Protection	6739	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	11. Coveralls, "Warning / Danger"	6736	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	12. Handler(s) Trained	6724	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	13. Emergency Med. Care Posting	6726	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	14. Employee Working Alone, "Danger"	6730	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	15. Decontamination Facility	6734	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	16. Eyewash Immed. Available - Prod. Ag.	6734(c)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	17. Field Postings	6776	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	18. Safe Equipment	6742	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		

COMPLIANCE ACTIONS:
Cease and Desist Order 11737 / 11897 / 13102 YES NO
Follow-up Required YES NO

COMPLIANCE ACTIONS, (Continued):
Correct Noncompliances By: _____

Remarks - Include a detailed description of noncompliances. When additional space is required, continue on Inspection Report / VN Supplement, PR-ENF-111.

INSPECTOR (Print Name) <i>Janet Heath</i>	Signature <i>Janet Heath</i>	TIME AND DATE INSPECTED <i>2/28/17 9am</i>
INSPECTION ACKNOWLEDGED BY (Print Name) [REDACTED]	Signature [REDACTED]	DATE ACKNOWLEDGED <i>2/28/17</i>

VIOLATION NOTICE YES NO # *0*

Santa Barbara County Agricultural Commissioner's Office

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Application Inspection of the block closest to the School:

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STATE OF CALIFORNIA
DEPARTMENT OF PESTICIDE REGULATION

PESTICIDE USE
MONITORING INSPECTION REPORT

PR-ENF-104 (REV. 01/10) Page 1 of 1

COMPLETE
 PARTIAL
 FOLLOW-UP INSPECTION

104- 850291

ORIGINAL INSP. # _____

Santa Barbara
INSPECTING COUNTY

FIRM / PERSON INSPECTED <u>SJ Custom Farming</u>		FIRM MAILING ADDRESS <u>10601 91 Solvang 93464</u>	
PROPERTY OPERATOR [REDACTED]	SUPERVISOR <u>none</u>	INTERVIEWED <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	BUSINESS TYPE <input checked="" type="checkbox"/> Property Operator <input type="checkbox"/> Pest Control Business <input type="checkbox"/> Maintenance Gardener <input type="checkbox"/> Other
ADJACENT ENVIRONMENT <u>Chamberlain Park Santa Ynez w Fanger Road N Rudland school pasture whead Road</u>		LICENSE NUMBER <u>A 4204051</u>	PERMIT / OPERATOR ID # <u>42-17-4204079</u>
TREATMENT AREA <u>whead Road</u>		LICENSE NUMBER <input type="checkbox"/> QAL <input type="checkbox"/> QAC <input type="checkbox"/> PAC <input type="checkbox"/> JPC <input type="checkbox"/> APC <input type="checkbox"/> UNL	TELEPHONE NUMBER <u>805-331-1918</u>
HANDLER'S NAME / # INTERVIEWED [REDACTED]		COMMODITY / SITE <u>wheat</u>	
ACTIVITY <u>mix & load applicator</u>		METHOD OF APPLICATION (CHECK ONE) <input type="checkbox"/> 1. AERIAL <input type="checkbox"/> 2. CHEMIGATION <input type="checkbox"/> 3. HAND HELD <input checked="" type="checkbox"/> 4. GROUND RIG <input type="checkbox"/> 5. OTHER	
PERSONAL PROTECTIVE EQUIPMENT WORN <u>tyred overalls, Chem gloves, full face Res long sleeves, long pants, Rubber boots</u>		WIND VELOCITY <u>2-4 mph</u>	
		DIRECTION <u>North to South East West</u>	

PESTICIDE NAME / MANUFACTURER	LABEL REGISTRATION NUMBER	SIGNAL WORD	FORMULATION	RATE	DILUTION
<u>Terbufos / Maestro 4 EC</u>	<u>17368-75</u>	<u>Warning</u>	<u>liquid</u>	<u>1 qt/A</u>	<u>20 gal</u>
<u>Leptor / LI 700</u>	<u>31704-30035</u>	<u>Danger</u>	<u>liquid</u>	<u>30/A</u>	<u>20 gal</u>

A. APPLICATION				B. MIX/LOAD				A. APPLICATION				B. MIX/LOAD			
COMPLIANCE				COMPLIANCE				COMPLIANCE				COMPLIANCE			
YES	NO	N/A	REQUIREMENTS	Section	YES	NO	N/A	YES	NO	N/A	REQUIREMENTS, (Continued)	Section	YES	NO	N/A
			1. PCB Licensed	11701							19. Closed Sys. Used /Criteria - "Danger"	6746			
			2. PCB Registered in County	11732							20. Protect. of Persons/Animals/Property	6614			
			3. Labeling Available at Use Site	6602							21. Equipment Registered - PCB	11732			
			4. Notice of Intent Submitted	6434							22. Equipment Identified - PCB	6630			
			5. Certified Applicator Sup RM	6406							23. Backflow Prevention - Airgap	6610			
			6. Complies w/Permit Conditions	12973							24. Containers Secured / Attended	6670			
			7. Labeling - Site/Rate/Other	12973							25. Containers Labeled / Closures	6676			
			8. Labeling - PPE	12973							26. Service Container Labeling	6678			
			9. Regulations - PPE	6738							27. Proper Containers	6680			
			10. Respiratory Protection	6739							28. Proper Pesticide Transport	6682			
			11. Coveralls, "Warning / Danger"	6736							29. Containers Properly Rinsed	6684			
			12. Handler(s) Trained	6724							30. Accurate Measurement	6604			
			13. Emergency Med. Care Posting	6726							31. Ground Water Protection	6487 1-5			
			14. Employee Working Alone, "Danger"	6730							32. Wellhead Protection	6609			
			15. Decontamination Facility	6734							33. Dormant Insecticides	6960			
			16. Eyewash Immed. Available - Prod. Ag.	6734(C)							<u>4 surfed water</u>				
			17. Field Postings	6776							TOTAL				
			18. Safe Equipment	6742							TOTAL				

COMPLIANCE ACTIONS:
Cease and Desist Order 11737 / 11897 / 13102 YES NO
Follow-up Required YES NO

COMPLIANCE ACTIONS, (Continued):
Correct Noncompliances By: _____

Remarks - Include a detailed description of noncompliances. When additional space is required, continue on Inspection Report / VN Supplement, PR-ENF-111.
owner operator applied incorrectly 750fd to school property line

INSPECTOR (Print Name) Harriet Hoach Signature Harriet Hoach
INSPECTION ACKNOWLEDGED BY [REDACTED] Signature [REDACTED]
TIME AND DATE INSPECTED 3/9/17 11:30
DATE ACKNOWLEDGED 3/9/17

VIOLATION NOTICE YES NO # _____