FIFI	D	ID	NO:	
IILL	- <i>U</i>	īυ	NO.	

PART 6. APPLICATION RECORDS-GREENHOUSE TRIALS

A. EQUIPMENT	
INSTRUCTIONS: Complete a separate form for each piece of tes	t substance application equipment used in the trial.
EQUIPMENT USED FOR APPLICATION NUMBER(S)	
EQUIPMENT IDENTIFIER ¹ ¹ Each test substance application equipment must have a	unique identifying name or code
APPLICATION EQUIPMENT TYPE (Check one) WAIST-BE OTHER(Describe)	LT BACKPACK GRANULAR
PROPELLANT (Check one) CO ₂ COMPRESS OTHER (Describe)	
TYPE OF APPLICATION (Check all that apply) 1) FOLIAR 2) BROADCAST 3) OTHER<(Describe)	
NUMBER OF NOZZLES OR HOPPER OUTLETS USED	
MESH SIZE USED IN THE STRAINERS	SPACING BETWEEN NOZZLES OR HOPPER OUTLETS
NOZZLE BRAND/TYPE/SIZE (e.g. T-JET 8004, even flat fan):	
For a broadcast application, $CWNDP = (\# of nozzles X n)$	at proper boom height X length of plot sprayed or treated. nozzle spacing). For a banded application, CWNDP = # of
nozzles X swath per nozzle. If application is foliar directe	ed enter treated row width X # of rows X length of plot

local commercial row width, and an explanation should be included on this page or inserted behind this page. Contact the Study Director if guidance is needed.

DOES TREATED AREA (for application rate calculations) = PLOT AREA (from Parts 5C and 5F)? YES_____ NO____

sprayed or treated; treated row width may differ from actual row width when the actual row width is wider or narrower than local commercial practices. In this circumstance, the application rate should be calculated using a

(For foliar directed and soil directed applications, check "YES" above unless local commercial row widths are used instead of the actual row width on the research plot. This prompt is intended to help data reviewers calculate the application rates correctly.)

IF NO, PLEASE EXPLAIN: _____

ABOVE DATA ENTERED BY: ______ DATE: ______ PART 6 PAGE _____ Trial Year 2020
Total number of pages in this section at initial pagination: _____
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IR-4 FIELD DATA BOOK

PART 6. APPLICATION RECORDS-GREENHOUSE TRIALS

B. DIAGRAM OF APPLICATION EQUIPMENT

EQUIPMENT USED FOR APPLICATION NUMBER(S) _____

INSTRUCTIONS: Complete a separate form for **each piece** of test substance application equipment used in the trial. Sketch a diagram and/or provide clear photograph of application equipment. Include the relative location and size of the target crop and the nozzle/hopper outlet placement and application pattern in relation to crop, in the sketch or photograph. In addition, on the sketch or photograph assign each nozzle or hopper outlet a unique number.

ABOVE DATA ENTERED BY: _____ DATE: _____ DATE: _____ DATE: _____ Trial Year 2020

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THE ORIGINAL IS IN IR-4 FIELD DA	ATA BOOK NO	INITIALS	_DATE

IR-4 FIELD DATA BOOK

PART 6. APPLICATION RECORDS-GREENHOUSE TRIALS

C.1. DISCHARGE CALIBRATION FOR APPLICATION NUMBER

INSTRUCTIONS: Complete a copy of this form (PHOTOCOPY IF NECESSARY) for additional times when a complete calibration or calibration-recheck of application equipment is required.

EQUIPMENT IDENTIFIER_____

DISCHARGE CALIBRATION DATE______PERFORMED BY_____(INITIALS)

APPROXIMATE TIME OF DAY THAT THE CALIBRATION WAS PERFORMED_____

LOCATION WHERE THE CALIBRATION WAS PERFORMED_____

INSTRUMENT USED TO MEASURE WATER (e.g. 100 ml graduated cylinder)

BRIEFLY DESCRIBE PROCEDURE USED TO CHECK DISCHARGE CALIBRATION

Instructions for recording Discharge Calibrations (6.C.2): Record time that applicator discharges and units measured. Collect output from each nozzle or hopper. Record this value in "RUN" column next to the appropriate outlet. Calculate the total and average discharge for all the nozzles/outlets. Entry prompts have been provided for three discharge calibration runs. For each run, calculate the total output of all nozzles/outlets, the mean output per nozzle or outlet, the nozzle or outlet discharge rate, and the total boom discharge rate in ml or grams per second. Also confirm whether the output of each nozzle or outlet during a run is within 5% of the mean output. If a recheck or confirmation of a target output is being performed, determine whether the results are within 5% of the full calibration or target. Enter all calculations on 6.C.1, below.

CALIBRATION CALCULATIONS:

ABOVE DATA ENTERED BY: _		 _ DATE:
	PART 6 PAGE	Trial Year 2020
COMPLETE IF APPROPRIATE: THE ORIGINAL IS IN IR-4 FIELD D	"THIS IS A TRUE COPY OF THE OI ATA BOOK NO	 .TE

IR-4 FIELD DATA BOOK

PART 6. APPLICATION RECORDS-GREENHOUSE TRIALS

C.2. DISCHARGE CALIBRATION FOR APPLICATION NUMBER

INSTRUCTIONS: Complete a copy of this form (PHOTOCOPY IF NECESSARY) for additional times when a complete calibration or calibration-recheck of application equipment is required.

Output Run Nur		1	2	3	Total	Average		
Pressure (psi)					(Required)	(Optional)		
Units (e.g. ml, grams)								
Time (seco	onds)							
Nozzle/Hopper	1							
Outlet Number	2							
Along Boom	3							
(These numbers	4							
should match	5							
those shown in	6							
the equipment	7							
diagram in 6.B)	8							
9								
	11							
12								
Total Boom Volume								
(sum of nozzle/outlet outputs) Mean per nozzle or outlet								
(mL or g)						7		
Discharge rate*								
(Total boom volume/time OR Mean nozzle volume/time								
in ml or g/second)								
*Indicate whether dischar	ge rate i	is calculated for:	(Check one) Tota	l Boom Volume	Mean Nozzle	e Volume		
Was this a recheck of discharge calibration or a 3-run target check? (Check one) YES NO								
If yes, were results within 5% of original calibration or target output? YES NO								
If this is a 3-discharge calibration run or a 3-run target check, is each boom discharge rate (bottom row in columns 1, 2, and 3) within 5% of the mean? YES NO NA								
Are individual nozzle ou	tputs w	vithin 5% of the 1	mean during each	n run?	YES NO	NA		
An output consisting of an amount of test substance to output result of the recheck produce a new, full calibra	average use. If is more tion. Th	of three runs <u>or</u> a f this is a recheck (than 5% different e original calibrat	target output may (one run) then the t than the original tion data, or a true	be used when c results of the ori calibration resu copy, must be in	alculating the sprayed ginal calibration mus lt, then two more run. 1 this field data book.	r output and t be used. If the s are needed to		

ABOVE DATA ENTERED BY: _____

DATE:	
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PART 6 PAGE

Trial Year 2020

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FIELD ID NO:

IR-4 FIELD DATA BOOK

PART 6. APPLICATION RECORDS-GREENHOUSE TRIALS

D. SPEED CALIBRATION FOR APPLICATION NUMBER(S) _____

INSTRUCTIONS: Complete a separate form for additional times when a complete calibration or calibration- recheck of application equipment is required.

EQUIPMENT IDENTIFIER

SPEED CALIBRATION DATE PERFORMED BY (INITIALS)

TERRAIN OF CALIBRATION TRACK (e.g. cement floor)

LOCATION WHERE THE CALIBRATION WAS PERFORMED_____

BRIEFLY DESCRIBE PROCEDURE USED FOR SPEED CALIBRATION _____

SPEED CALIBRATION: Calculate the speed of the application equipment. If appropriate, note the gear setting and /or RPM setting used in the speed calibration. Indicate the distance (in feet) of the track on which the application equipment was tested to determine speed (e.g. speed of application equipment tested for 100 ft.). The speed is calculated by dividing the length of test track (in feet or meters) by the time needed to cover that length (in seconds). Entry prompts have been provided for 2 additional runs. If this is a recheck, calculate the result is within 5% of the original calibration. Show all calculations. A speed recheck (one run) is required whenever an output recheck is performed, except for multiple applications within a study that are made on the same day on the same farm.

RUN	GEAR	RPM	Length of test track (include units)	TIME (sec)		LATED SPEED clude units)
1						
2						
3						
Total of times (se			Average time (sec)		Average speed	

CALCULATIONS:

WAS THIS A RECHECK OF SPEED CALIBRATION?	(Check one)	YES	NO
IF YES, WERE RESULTS WITHIN 5% OF ORIGINAL CALIBRATION? <i>The original calibration data, or a true copy, must be in this field data book.</i>		YES	NO
The original calibration and, of a true copy, must be in this field and book.			

NOTE: A target speed may be used for application calculations, rather than the	mean of three runs, but for each	ch application a
full speed calibration must be conducted, and the mean of the three runs must be	within 5% of the target speed	l.
WAS THIS A CHECK OF A TARGET SPEED?	(Check one) YES	NO
IF YES, WERE RESULTS WITHIN 5% OF TARGET SPEED?	YES	NO
ABOVE DATA ENTERED BY:	<i>DATE:</i>	
PART 6 PAGE	Trial Yea	ar 2020
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FIELD ID NO: _____ IR-4 FIELD DATA BOOK

PART 6. APPLICATION RECORDS-GREENHOUSE TRIALS

E. DELIVERY RATE CALIBRATION FOR APPLICATION NUMBER(S)

INSTRUCTIONS: Complete a separate form for each application, unless the same parameters are used-- you are using the same equipment, and have performed a recheck to confirm the result of the full calibration. Determine the rate of delivery from the application equipment. Briefly describe the procedure, including formulas used to determine delivery rate calibration. Show all calculations and units. Equations used in electronic (computer software) calculations in this trial must be transcribed or printed out and attached here. Computer-generated values (as opposed to those entered by the field cooperators) must be reviewed and clearly delineated by circling, initialing, and dating.

PROCEDURE/FORMULA:

CALCULATIONS:

PROTOCOL SPECIFIED SPRAY VOLUME (from Part 15 Enter "NA" if a spray volume is not applicable.	5, in gallons per acre or liter	rs per hectare):	
ABOVE DATA ENTERED BY:		DATE:	
PART 6 PA	GE	Trial Year 2020	
COMPLETE IF APPROPRIATE: "THIS IS A TRUE COPY THE ORIGINAL IS IN IR-4 FIELD DATA BOOK NO		DATE	

IR-4 FIELD DATA BOOK

PART 6. APPLICATION RECORDS-GREENHOUSE TRIALS

F. VOLUME, MIXING AND DILUTION CALCULATIONS FOR APPLICATION NUMBER(S)

INSTRUCTIONS: Complete a separate form for each application, unless there are no changes in multiple applications. Show all calculations, formulas, and results below, define units of measure, and cite the initials of the person performing the calculations. Equations used in electronic (computer software) calculations in this trial must be transcribed or printed out and attached here. Computer-generated values (as opposed to those entered by the field cooperators) must be reviewed and clearly delineated by circling, initialing, and dating.

DESCRIBE HOLDING AND TRANSPORT OF TEST SUBSTANCE FROM STORAGE AREA TO LOCATION OF TANK MIXING (E.g.: "Test substance held securely in an insulated cooler hand-carried during transport to greenhouse site" or "Tank mix prepared within walking distance of the chemical storage building")

ABOVE DATA ENTERED BY:		DATE:
	PART 6 PAGE	Trial Year 2020
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PART 6. APPLICATION RECORDS-GREENHOUSE TRIALS

G. APPLICATION INFORMATION FOR APPLICATION NUMBER _____ APPLICATION DATE _____

HAS THE APPLICATION EQUIPMENT BEEN USED SINCE THE LAST (*Check one*) YES_____ NO_____ CALIBRATION/RECHECK WAS PERFORMED? (If you are about to check YES, then a recheck is usually required.)

INSTRUCTIONS: Complete a separate form for each application date and for each treatment on one application date (use the Treatment Number as indicated in the protocol). Provide the name of the test substance (common chemical name or chemical code number); the batch or lot number of the test substance; the approximate time the test substance was mixed with the carrier and the approximate time the mixture was applied to the plots, along with the initials of the person(s) mixing and spraying the tank mix; the time of additional agitation; the unique name or code for the application equipment used to apply this treatment; the placement of the test substance (e.g. broadcast, in-furrow, directed, knifed-in, banded); the amount of carrier, formulated product and adjuvant in the mix; the measuring equipment with increments; the distance (include units) of the nozzles above the canopy or ground (indicate which); the pressure in pounds per square inch at the boom; and the carrier (normally water), its source (e.g. farm pond, city water), pH of the carrier and its temperature, and the equipment used to measure the carrier pH.

	TRT N	lumber
NUMBER OF DAYS SINCE PREVIOUS APPLICATION		TIME OF ADDITIONAL AGITATION (if applicable)
TEST SUBSTANCE		e.g. "10:00" or "continuous" or "just prior
BATCH/LOT NUMBER/Container#1		to application"
TIME MIXED/INITIALS		
TIME APPLIED/INITIALS		
EQUIPMENT IDENTIFIER		
PLACEMENT OF TEST SUBSTANCE		
TANK MIX AMOUNTS	MEASURING	EQUIPMENT with INCREMENTS*
CARRIER (starting volume of water)		
VOLUME of WATER REMOVED from starting volume (if applicable)		
TEST SUBSTANCE (formulated product)		
ADJUVANT		
TOTAL VOLUME OF TANK MIX	*e.g. 100	0 mL grad. cylinder/10 ml incr.
NOZZLE DISTANCE from TARGET		ORDER IN WHICH ITEMS WERE ADDED TO SPRAY MIXTURE*
PSI AT BOOM		W=Water, TS=Test Substance, A=Adjuvant
CARRIER SOURCE/TYPE		*e.g. 1-W, 2-TS, 3-A, 4-W
CARRIER pH/TEMPERATURE		
EQUIPMENT used to MEASURE pH		
If more than one test substance container w WERE THE TREATED PLANTS MOVED		batch or lot number is needed.
ANOTHER ROOM OR PROTECTED ARE	-	NO
F YES, IDENTIFY LOCATION:		

ABOVE DATA ENTERED BY: ____

_____ DATE: _____

PART 6 PAGE ____

PART 6. APPLICATION RECORDS-GREENHOUSE TRIALS

H. ADDITIONAL INFORMATION FROM APPLICATION NUMBER

APPLICATION DATE _____(Complete a separate form for each application date)

PLANT GROWTH & ENVIRONMENTAL DATA AT THE TIME OF APPLICATION	Enter data in this column
CROP HEIGHT (Measure or estimate crop height, include units of measurements)	
CROP GROWTH STAGE (e.g. seed, vegetative, bud, bloom, fruiting, #true leaves)	
CROP VIGOR (e.g. poor, fair, good, variable)*	
PLANT SURFACE MOISTURE (Check one) SATURATED	DAMP DRY NA
ESTIMATED % OF GROWING MEDIUM AREA COVERED BY CROP CANOPY	
MEASURED AIR TEMPERATURE (<i>Check F or C</i>) (<i>E.g.</i> 75 $^{\text{O}}\text{F}_{\checkmark}$ $^{\text{O}}\text{C}_{_}$)	⁰ F0C
ESTIMATED % OF CLOUDS IN THE SKY (or indicate if shade cloth was in use)	
MEASURED RELATIVE HUMIDITY%	
TYPE OF SURFACE THAT APPLICATOR WALKED ON DURING APPLICATION	
DESCRIPTION OF GROWING MEDIUM TILTH (smooth, firm, packed, cloddy, etc.)	
ESTIMATE OF GROWING MEDIUM SURFACE MOISTURE (wet, moist, dry, etc.)	
GROWING MEDIUM TEMPERATURE (Check F or C)	⁰ F ⁰ C
DEPTH OF MEASUREMENT OF GR. MED. TEMPERATURE (Check INCHES or cm)	INCHES cm

*IF CROP VIGOR IS POOR OR VARIABLE, EXPLAIN:

ABOVE DATA ENTERED BY: _____

_____ DATE: ___

BRIEFLY DESCRIBE PROCEDURE USED TO CLEAN APPLICATION EQUIPMENT AND IDENTIFY WHO CLEANED IT:

CLEANED BY: _____

CLEANING DESCRIPTION ENTERED BY: _____ DATE: _____

ABOVE DATA ENTERED BY: _____ DATE: _____

PART 6 PAGE ____

FIELD ID NO: _____ IR-4 FIELD DATA BOOK

PART 6. APPLICATION RECORDS-GREENHOUSE TRIALS

I. PASS TIMES FOR APPLICATION NUMBER _____

APPLICATION DATE___

_____ (COMPLETE A SEPARATE FORM FOR EACH APPLICATION DATE)

RECORD PASS TIME AND PASS DIRECTION - *Complete the table by providing the time required to make each pass of the application equipment through the plot and direction of that pass (e.g. NE).*

	TREATMENT		TREATMENT		
PASS NUMBER	TIME DIRECTION		PASS NUMBER	TIME	DIRECTION
1			1		
2			2		
3			3		
4			4		
5			5		
6			6		
7			7		
8			8		
9			9		
10			10		
11			11		
12			12		
TOTAL PASS TIME					

ABOVE DATA ENTERED BY: _____

_____ DATE: _____

PROVIDE A BRIEF NARRATIVE SUMMARY OF THE APPLICATION AND IDENTIFY WHO PERFORMED IT:

(E.g. "Test substance was applied to the treated test plot in two passes; one pass down each side of the row. Each pass was applied to the potted plants, with the spray boom held vertically so that the swath covered all of the foliage.")

APPLICATION WAS MADE BY: _____

NARRATIVE ENTERED BY_____

_____ DATE: _____

PART 6 PAGE _____

PART 6. APPLICATION RECORDS-GREENHOUSE TRIALS

J. POST APPLICATION RATE CONFIRMATION FOR **APPLICATION NUMBER**

APPLICATION DATE_____(COMPLETE A SEPARATE FORM FOR EACH APPLICATION DATE)

CALCULATION OF ACTUAL APPLICATION RATE AND SPRAY VOLUME - Using information such as total pass time, plot size, tank mix amounts, and discharge rate (average of 3 outputs) determine the actual amount of formulated test substance applied to treated plots. Even if a target rate was used for the pre-application calculations, the data from the calibration (average of 3 outputs) must be used for calculating the application rate. (If the protocol does not include a rate of formulated product, then the amount of active ingredient should be determined.) Convert this amount to the amount applied per acre (or hectare), and determine deviation from target application in the protocol, rounded to the nearest whole percent. Show all calculations and label all units. It is not sufficient to merely compare the actual pass times to the "practice" pass times. The example formulas listed at the bottom of 6J may be used to calculate the application rate. Calculations may be entered on a separate page placed after this one, if there is not enough space below.

EXAMPLE FORMULAS: The formulas below may be used to calculate the amount of test substance (TS) applied per acre as required in Part 6I. Other formulas may be used instead; however, it is not sufficient to merely compare the actual pass times to the "practice" pass times.

1) Total Pass Time x Discharge Rate/Nozzle x #Nozzles = Volume of Tank Mix applied to Plot

2) Volume of Tank Mix applied to Plot x <u>Amount of TS in Tank Mix</u> = Amount of TS applied to Plot Total Volume of Tank Mix

3) Amount of TS applied to Plot x 43,560 sq ft per acre = Amount of TS applied per acre Plot area treated in sq ft

4) Volume of Tank Mix applied to Plot x $\underline{1 \text{ gallon}}$ x $\underline{43,560 \text{ sq ft per acre}} = \text{Spray Volume in gallons per acre (GPA)}$ 3785 ml Plot area treated in sq ft

% DEVIATION FROM THE PROTOCOL RATE SHOULD BE ROUNDED LIKE THIS: -5% OR THIS: +8%, *NOT* LIKE THIS: -5.4% *OR* THIS: +8.29% OR THIS: +3.141592653589793238462643383279502884197169399%

DISCHARGE RATE (ml/sec or g/sec):

ACTUAL AREA TREATED (swath width or treated row or bed width x # of passes x length of plot):

Note: Use bed width for plots with multi-row beds.

WAS ACTUAL APPLICATION RATE WITHIN -5% TO +10% OF PROTOCOL RATE?

IF NO, Contact the Study Director immediately. (Check one) YES NO WAS ACTUAL SPRAY VOLUME WITHIN THE PROTOCOL RANGE?

(Check one) YES_____ NO____ NA____ IF NO, Contact the Study Director immediately.

ABOVE DATA ENTERED BY: DATE:

PART 6 PAGE ____

F	IFI	D	П	NO:	
		υ.	ıυ	NO.	

PART 6. APPLICATION RECORDS-GREENHOUSE TRIALS

K. POST TREATMENT RECORDS FOR APPLICATION NUMBER

APPLICATION DATE

(*Complete a separate form for each application date*)

Was There Any Visible Phytotoxicity Damage? (Check one) YES____ NO____ Initials/date: ___ Date Crop Was Observed:

If YES, then contact the Study Director, fill in the box below*, and if a digital camera is available, email digital photograph(s) to the Study Director along with a detailed explanation of the damage. If NO, then line out the entire box with initials and date, <u>unless</u> the protocol requires a phytotoxicity rating. If so, fill in the box below*.

*Alternatively, a separate sheet with a description of the phytotoxicity may be inserted at the back of Part 6.

DESCRIPTION OF PHYTOXICITY SYMPTOMS:		
РНҮТ	OTOXICITY DESCRIBED BY:	(Initials/date)
DATE STUDY DIRECTOR WAS CONTACTED:	CONTACTED BY:	(Initials/date)

Enter the requested information below for the first irrigation after each application, regardless of whether subsequent applications were made prior to the first irrigation. The irrigation data entered below should be transcribed from the data included in Part 9 unless otherwise indicated on this page. If irrigation is required by the protocol to incorporate the test substance, or if the test substance is applied by irrigation, then that event should be recorded below. "NONE BEFORE HARVEST" or "NONE BEFORE SAMPLING" may be entered, if applicable.

TYPE OF IRRIGATION (e.g. overhead, trickle, flood)	
DATE OF FIRST IRRIGATION (Note the date of first irrigation after this application.)	
TIME AFTER APPLICATION THAT PLOTS WERE EXPOSED TO FIRST IRRIGATION (Check DAYS or HOURS) (Enter #hours if first irrigation was <u>on the date of application</u> .)	DAYS HOURS
AMOUNT OF WATER (Check INCHES, mm, or mL)	INCHES mm mL
IRRIGATION INFORMATION RECORDED BY(Initials/date)	

If the data entered above differ from the irrigation data included in Part 9, explain:

Initials/date:	
PART 6 PAGE	Trial Year 2020
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PART 6. APPLICATION RECORDS-GREENHOUSE TRIALS

L.1. DIFFERENTIATION OF MULTIPLE TRIALS CONDUCTED IN CLOSE PROXIMITY*

ARE YOU CONDUCTING MORE THAN ONE TRIAL IN THIS STUDY? YES____ NO____

IS ANOTHER FIELD RESEARCH DIRECTOR IN THIS STUDY CONDUCTING A TRIAL WITHIN 20 MILES OF YOUR TRIAL(S)? YES___ NO___

If "NO" is checked twice, then no other input is needed except for signing and dating at the bottom of each page. If "YES" is checked at least once, then an independently prepared tank-mix must be used in each trial, except in studies in which this is not applicable such as studies with granular formulations.

In order to differentiate these trials, select one option from Set 1 <u>OR</u> two options from Set 2.

If $\underline{3}$ or more trials in this study cannot be differentiated by the same options, then you should check all options that have been used, and explain below which options are differentiating between which trials.

If different crop varieties are being used as a differentiation option, then enter below information that explains why these varieties were chosen. Examples: Variety A produces large fruit, whereas Variety B produces small fruit. Variety A produces fruit with a smooth skin, whereas Variety B produces fruit with a rough skin. Varieties A and B are the two most commonly grown cultivars in this state.

If options are used that are listed in the protocol but are not listed in the table in Part 6.L.2, then enter descriptions of those options below.

Enter below any additional information that will improve the understanding of the options that have been chosen.

*Trials conducted in different calendar years are exempt from these requirements. (If separate trials by the same person or within 20 miles are conducted in late fall/early winter, then the differentiation options should be used to reduce the possibility of data rejection by a regulatory agency.)

Trial IDs of other trials in this study to which these options are being applied:

Additional information:	
ABOVE DATA ENTERED BY:	DATE:
PART 6 PA	GE Trial Year 2020
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	DATE

IR-4 FIELD DATA BOOK

PART 6. APPLICATION RECORDS-GREENHOUSE TRIALS

L.2. DIFFERENTIATION OF MULTIPLE TRIALS (IF YOU CHECKED "YES" ON THE PREVIOUS PAGE) Some options included in this table may not be acceptable for use in this study. Refer to Protocol Section 11.4 for the study-specific list of options.

Check the options (in the third column) used to differentiate the trials that you are conducting in this study:

Set	Option	 Description
	A	Trial sites must be separated by at least 20 miles (32 km) [measured as straight line distance]
	В	First application or planting date (for annual crops) in each trial is separated by at least 30 days
1	С	Different crop variety (different size or shape at maturity, rough vs. smooth surface, different amount of foliage shielding the commodity, different rate of growth, or representative of the major varieties grown within the region)—confirm with Study Director if this option will be chosen
	A	Spray volume must vary by at least 25% of the lower volume (minimum 10 GPA difference) Example 1, Trial A has a volume of 20 GPA and Trial B has a volume \geq 30 GPA Example 2, Trial A has a volume of 60 GPA and Trial B has a volume \geq 75 GPA The trial with the lowest spray volume for the first application must remain the lowest for each application; the trial with the highest must remain the highest for each, and so on
	В	Use of an adjuvant (of any suitable type) in the tank mix for one trial vs. <u>no adjuvant</u> in the tank mix for another trial
	С	Different foliar application type: foliar directed or foliar broadcast (Do not use this option if the label instructions for this commodity will specify one type or the other)
	D	Different granular application type: broadcast or banded (only if label supports both types)
	E	Different types of application equipment be used in each trial (for example, tractor-pulled boom sprayer, tractor-pulled spreader, airblast sprayer, axial fan orchard sprayer, proptec sprayer, cannon mist sprayer, tower sprayer, over-row sprayer, tunnel sprayer, backpack sprayer, waist pack sprayer, hand gun, hand-held spreader, or shaker can)
2	F	Different spray droplet size (fine, medium, coarse, very coarse, or extra coarse) This may be accomplished by changing nozzles and/or by changing spray pressure Document in the Field Data Book the droplet size that results from the pressure and nozzles used in the trial (nozzle catalog may be used as a reference) Coarse, very coarse, and extra coarse are appropriate for herbicides only
	G	Different incorporation method for soil-applied test substance: mechanical or irrigation
	H	Different band width for soil applications: band width must vary by at least 50% of the lower width
		Different irrigation type (drip or furrow or sprinkler/over-the-top) (Irrigation must be applied at least once after each application, but over-the-top irrigation must not be applied within one hour of an application, and irrigation is not needed following the last application if samples are to be collected on the same day)
	J	For test substances that must be applied through drip irrigation: surface drip line or buried drip line
	K	Different planting arrangement for annual crops: single row beds or multi-row beds (two or more rows on each bed)
	L	One trial shall have trellised plants and the other shall not
	М	Different training system for fruit trees (for example, central leader or open center)
	N	Different maturity of trees or bushes in fruit and nut studies—young trees or bushes in one trial and mature trees or bushes in the other (minimum 5 year age difference); all trees/bushes must be commercially productive
	0	Different soil series, type, or texture (only in trials in which applications are made to the soil)
	Р	Different formulations of the test substance (within the types generally considered equivalent)

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_____ DATE: _____

PART 6 PAGE

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PART 6. APPLICATION RECORDS-GREENHOUSE TRIALS

M. APPLICATION EQUIPMENT MAINTENANCE AND REPAIR LOG

INSTRUCTIONS: Complete this form or provide equivalent information. Provide dates and a brief description of maintenance and repair work completed on the application equipment relevant to this trial. Be sure to date and initial all entries.

APPLICATION EQUIPMENT IDENTIFIER_____

EQUIPMENT USED FOR APPLICATION NUMBERS_____

INITIALS/DATE_____

RECORD DATES AND BRIEF DESCRIPTION OF ANY MAINTENANCE AND REPAIR WORK DONE ON THE APPLICATION EQUIPMENT, OR ATTACH TRUE COPIES OF THE LOGS. <u>ALSO RECORD SOP# FOLLOWED, IF APPLICABLE.</u>

	Was Maintenance			
	or Repair routine? (Check one)			
Initials and Date	Yes	No	SOP#	Description
mittais and Date	105	INU	301#	Description

PART 6 PAGE ____

Trial Year 2020

COMPLETE IF APPROPRIATE:	"THIS IS A TRUE COPY OF THE O	RIGINAL"	
THE ORIGINAL IS IN IR-4 FIELD D.	ATA BOOK NO	INITIALS	DATE