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CLIENT

[Redacted Client Information]



molloyag.co.nz

Crop Inspected by
[Redacted]

Date Inspection
[Redacted]

Contact Tel.
[Redacted]

Paddock Reference	Ha	Crop & Variety	Reason for Treatment	Products Recommended & Rates		Water Vol.	Special Instructions	SPRAYER		
								Operator	Date Sprayed	
[Redacted]	[Redacted]	[Redacted]	[Redacted]	[Redacted]		[Redacted]	[Redacted]	Start Time	Finish	
[Redacted]	[Redacted]	[Redacted]	[Redacted]	[Redacted]		[Redacted]	[Redacted]	WEATHER		
[Redacted]	[Redacted]	[Redacted]	[Redacted]	[Redacted]		[Redacted]	[Redacted]	Rain	<input type="checkbox"/>	
[Redacted]	[Redacted]	[Redacted]	[Redacted]	[Redacted]		[Redacted]	[Redacted]	Pre-Spraying	<input type="checkbox"/>	
[Redacted]	[Redacted]	[Redacted]	[Redacted]	[Redacted]		[Redacted]	[Redacted]	During Spraying	<input type="checkbox"/>	
[Redacted]	[Redacted]	[Redacted]	[Redacted]	[Redacted]		[Redacted]	[Redacted]	Post Spraying	<input type="checkbox"/>	
[Redacted]	[Redacted]	[Redacted]	[Redacted]	[Redacted]		[Redacted]	[Redacted]	TEMPERATURE		
[Redacted]	[Redacted]	[Redacted]	[Redacted]	[Redacted]		[Redacted]	[Redacted]	<5	<input type="checkbox"/>	
[Redacted]	[Redacted]	[Redacted]	[Redacted]	[Redacted]		[Redacted]	[Redacted]	6-10	<input type="checkbox"/>	
[Redacted]	[Redacted]	[Redacted]	[Redacted]	[Redacted]		[Redacted]	[Redacted]	11-20	<input type="checkbox"/>	
[Redacted]	[Redacted]	[Redacted]	[Redacted]	[Redacted]		[Redacted]	[Redacted]	20>	<input type="checkbox"/>	
TOTAL PRODUCT REQUIRED	PRODUCT	QTY.	PRODUCT	QTY.	PRODUCT	QTY.	SKY <input type="checkbox"/> Misty <input type="checkbox"/> Overcast <input type="checkbox"/> Weak Sun <input type="checkbox"/> Strong Sun	SOIL <input type="checkbox"/> Dry <input type="checkbox"/> Moist <input type="checkbox"/> Wet <input type="checkbox"/> Frozen	HUMIDITY <input type="checkbox"/> Dry <input type="checkbox"/> Ave <input type="checkbox"/> High	WIND <input type="checkbox"/> Calm <input type="checkbox"/> Light <input type="checkbox"/> Mod <input type="checkbox"/> Gusty