



Australian Government

Department of the Environment, Water, Heritage and the Arts

Ozone Protection and Synthetic Greenhouse Gas Management Regulations 1995

<input type="checkbox"/>	January to June
<input type="checkbox"/>	July to December
of	(year)

REPORT OF ALL USE OF METHYL BROMIDE BY CRITICAL USE EXEMPTION HOLDERS

Company Name: _____ ABN: _____

Address: _____ Pcode: _____

Date of Use	MeBr:Pic Mix Used	Dosage rate kg/ha or kg/m ³	No. of Hectares/ No and Volume of Containers Treated	Total Quantity Used (kg)	Crop or Commodity for which treatment conducted	Where applicable:			
						Contractor Name	Contractor Address	Contractor Telephone Number	Contractor ABN
						Signature of Contractor Verifying Quantity and Date of Fumigation: _____			
						Signature of Contractor Verifying Quantity and Date of Fumigation: _____			
Total Quantity Methyl Bromide Used this page (kg):									

*No methyl bromide was used by me, or on my behalf, for non-QPS applications in the period to which this report relates. (**delete if not applicable*)

Signed: _____ Print Name: _____

Contact phone number: _____