

Pre-Season Check List

Agronomist and Grower

Farmer Name:.....

Address:.....

.....

.....

Clearfield Accredited Agronomist:.....

I acknowledge that I have read the Clearfield Best Management Practice

Clearfield Crops grown:

| | | | | |
|---|--|---|---|--|
| <input type="checkbox"/> Clearfield Canola | <input type="checkbox"/> Clearfield Wheat | <input type="checkbox"/> Clearfield Plus Wheat | <input type="checkbox"/> Clearfield Barley | <input type="checkbox"/> Clearfield Maize |
|---|--|---|---|--|

I am aware of the weed species and pressure in the paddock

I have considered the potential resistance status of the weed species present

I have completed the Clearfield Paddock Plan

I have controlled volunteers prior to planting

I have a plan for managing weed escapes and selected alternate mode of action group herbicides

I have determined a plan for managing volunteers following this Clearfield Crop