



# Fertilizer Application Record (Type, Rate, Date) Checklist

## Record Header Information

Basic details about the application event.

### Record Creation Date

### Record Identifier (e.g., Application ID)

### Record Status (e.g., Draft, Submitted, Approved)

- ☐ Draft
- ☐ Submitted
- ☐ Approved
- ☐ Rejected

### Prepared By (Name/Position)

Date of Application

Enter date...

Field/Area Details

Information about the specific area where fertilizer was applied.

Field Name/ID

Write something...

Area (Acres/Hectares)

Enter a number...

GPS Coordinates (Optional)

Set My Current Location



### Crop Type

- ☐ Corn
- ☐ Soybeans
- ☐ Wheat
- ☐ Alfalfa
- ☐ Pasture
- ☐ Other

### Soil Type (Approximate)

- ☐ Sandy
- ☐ Loamy
- ☐ Clay
- ☐ Silt
- ☐ Organic

### Last Soil Test Date

Enter date...

## Fertilizer Details

Specifics about the fertilizer product used.

### Fertilizer Type

- ☐ Nitrogen
- ☐ Phosphorus
- ☐ Potassium
- ☐ Compound (NPK)
- ☐ Organic
- ☐ Other

### Fertilizer Product Name

Write something...

### Total Nutrients (%)

Enter a number...


### NPK Ratio

Enter a number...

### Fertilizer Composition (Optional)

Write something...

### Fertilizer Label/SDS (Optional)

 Upload File

## Application Details

Information about how the fertilizer was applied.

### Application Date

Enter date...

### Application Time

### Application Method

- ☐ Broadcasting
- ☐ Banding
- ☐ Side-dressing
- ☐ Foliar Spray
- ☐ Other

### Application Depth (inches)

Enter a number...

### Weather Conditions During Application (e.g., temperature, rainfall)

Write something...

### Equipment Used

- ☐ Manual
- ☐ Tractor
- ☐ Air Seeder
- ☐ Spreader
- ☐ Other

## Applicator/Operator Information

Who performed the application.

### Applicator Name

Write something...

### **Applicator Employee ID (if applicable)**

Enter a number...

### **Applicator Role/Position**

- ☐ Operator
- ☐ Supervisor
- ☐ Agronomist
- ☐ Other

### **Certification Status (e.g., Certified Applicator)**

- ☐ Certified
- ☐ Not Certified
- ☐ N/A

### **Applicator Certification Expiration Date (if applicable)**

Enter date...

### **Applicator Comments/Notes**

Write something...

## **Notes/Observations**

Any additional observations or comments about the application.

### **Weather Conditions During Application**

Write something...

### **Any Issues Encountered During Application (e.g., equipment malfunction, uneven spread)**

Write something...

### **Signs of Crop Response (Immediate or Anticipated)**

Write something...

### **Unusual Observations Related to Soil or Crop Health**

Write something...

### **Estimated Percentage of Area Covered (if not 100%)**

Enter a number...

### **Further Actions Planned (e.g., follow-up observations, adjustments to next application)**

Write something...