






Pest Control Diary

Please record any pests or diseases that you find on your flowering crops, and any action you take to control them. If you used a chemical (e.g. insecticide/fungicide) note how you applied it (e.g. spray or pellets) and the chemical and/or brand if you know it. At the end of the month we will email you a short survey where you can submit your data. All data will be anonymous.

Crop Type 	Date	Type of Pest/Disease/Weed  <i>e.g. slugs, rust, bindweed</i>	Severity of Problem (Please Tick)				Action Taken  <i>e.g. slug pellet, bug spray</i>	How successful was the action in solving the problem? (Please Tick)		
			Total Crop Loss	Severe Damage	Moderate Damage	Slight Damage		Very	Moderately	Not at all

