


The UNIVERSITY of WESTERN ONTARIO
Physical Plant and Capital Planning Services Division

POLICY: PESTICIDE USE			NUMBER: S-24
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PREPARED BY: PP&CPSD	AUTHORIZED BY: D.V.B. Riddell 	CLASSIFICATION: Safety Procedure	EFFECTIVE: September 1, 2004
			SUPERSEDES: New

APPLICATION:

This procedure outlines the minimum requirements to follow in the application of pesticides indoors and outdoors.

BACKGROUND:

The application of pesticides for the purpose of eliminating or controlling insect population must be considered as a last option, when all other non-invasive methods have been exhausted. Due to their inherent toxicity, pesticides which may leave residue for more than 24 hours may not be used on campus.

An important part of this procedure is proper and clear communication with occupants of buildings affected by pesticide use.

Whenever possible, the application of pesticides must be performed on Friday evenings, which will allow vapours a period of two days to completely dissipate from the workplace.

PROCEDURE:

I. Indoors:

- a. Obtain a **Material Safety Data Sheet** for the product.
- b. Ensure that the product is approved for indoor use.
- c. Inform occupants, in writing, of the application activities, date and name of pesticide (see attached *Pesticide Use Communications Form*).
Occupants must agree with proposed activities schedule.
- d. Post affected areas with warning signs.
- e. Apply after 5:00 p.m. or at least four hours prior to start of work shift.
In the residences, tenants must leave affected areas for at least 4 hours.
- f. Only licenced contractors will apply any Ministry of the Environment pest control product.

II Outdoors:

- a. Obtain a **Material Safety Data Sheet** for the product.
- b. Post the affected area with warning signs 1 day prior to pesticide application.
- c. Pesticides will only be applied between May 1 to August 31 with the exception of Dormant O.
- d. Spraying will only be carried out on weekends.
- e. All building exterior ventilation intake fans will be shut off to avoid intake of vapours.

PESTICIDE USE COMMUNICATIONS FORM

Name of Pesticide:	<hr/> <hr/>
Application Date and Time:	<hr/> <hr/>
Affected Area:	<hr/> <hr/>
Other Information:	<hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/>
Contact Name and Number:	<hr/> <hr/>