

Enrollment Form

Busine	ss Nam	e:					
Mailin	g Addre	ss:					
Main (Contact	Owner		(Street, City, Zip Code)			
		Owner:					
Lillall.							
			LAILG #	#			
Site Ac	ldress o	r cross streets (if different from ab	ove):				
Parcel	is owne	d by (please select one): 🗆 DW	'P 🗆 SoCa	l Edison 🗆 Landowner 🛛	C Renter (Lis	st Ownei	name and address below):
Main (ontact	(if different from above):					
		e:					
		l:					
		of this site:					
		Assessor Parc					– Parcel Size (Acres)
		//////					
****		lana isin kutan (lanan					
		el numbers, please visit: <u>https://maps</u> nal sites, please see page 3	assessor.ia	<u>county.gov/m/</u>			
		RATIONAL QUESTIONS					
1.	What i	is your primary crop?					
		Nursery Stock			Orchard		
		Greenhouse			Vineyard		
2.	□ What i	Row Crops is your company's gross annua	l sales?				
		Up to \$50,000		\$50,001-\$199,999			\$200,000-\$349,999
		\$350,000-\$500,000		\$500,001-\$1,000,000			\$1,000,001-\$1,999,999
		\$2,000,000-\$5,000,000		Over \$5,000,000			+ _, , , + _, , , ,
3.	Please	e review your pesticide use rep	orts.				
		How many applications have a How many different pesticide		•			-
4.	What	methods do you use to apply p	esticides?	Please break down in	to percenta	ages.	
		% Spray					
		% Drench/Sprench					
		% Other (specify below)				



5. What methods do you use to apply fertilizer? Please break down into percentages.

	% Fertigation		% Va	riable Rate Applications	using GPS
	% Split Fertilizer/Cor	ntrolled Release Applications	% Ot	her	
	% Foliar N Applicatio	n			
6.	What methods of irrigat	tion do you use?			
	% Drip			% Sprinkler	
	% Micro S	prinkler		% Hand Water	
	% Furrow				
7.	Where does your irrigat	ion water come from?			
	% Well			% Recycled Wa	ater
	% Water F	Purveyor/Agency		% Surface Dive	ersion
8.	Total irrigated acres for	operations in the United State	s?		
9.	How many agricultural	facilities does your company o	perate in the Uni	ted States?	
10.	Do you ship out of state	?			
	□ Yes			No	
11.	Do you move material b	etween facilities (Only applies if	you have more than	one facility)?	
	□ Yes			No	
12.	Do you ship material (ei	ther sales or intracompany tra	nsfer north of Sa	inta Barbara?	
	□ Yes			No	
13.	What language would y	ou prefer to receive communio	cation from LAILO	5?	
	English			Spanish	
	□ Both			Other	
14.	How would you like to r	eceive your annual invoice?			
	🗆 Email			Hardcopy via USPS	
	Both			Other	
15.	Would you rather atten	d a continuing education meet	ing:		
	□ In person	🗆 Via	Webinar		No preference
16. In what language would you prefer continuing education meetings be taught?					
	English			Spanish	
	□ Both			Other	

Mail or email completed form to LAILG, 1521 I St., Sacramento, CA 95814 or ariana@nurserygrowers.org

📂 LOS ANGELES IRRIGATED LANDS GROUP

LAILG #_____

Site Address or cross streets (if different from above):

Parcel is owned by (please select one): DWP SoCal Edison Landowner Renter (List Owner name and address below):

Main Contact (if different from above): _____

_____Cell Phone Number: ______

Business Email:

Business Phone:

Total Acreage of this site:

Irrigated Acreage of this site:

Assessor Parcel Number*	Parcel Size (Acres)

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