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BOARD OF PESTICIDES CONTROL
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SETH H. BRADSTREET
COMMISSIONER

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DIRECTOR

July 2, 2009

TO: Board Members

FROM: Gary Fish, Manager, Pesticide Programs

RE: Concerns Regarding Scheduled Routine Preventative Pesticide Applications Meeting the Intent of CMR 01-026 Chapter 26 Standards for Indoor Pesticide Applications

The Board's Staff is concerned about what they see as scheduled routine pesticide applications primarily for control of bedbugs that seem to run counter to the provisions set forth in CMR 01-026 Chapter 26, Section.1 (D) and Section 4 (A).

Section 1 (D) states:

“Integrated Pest Management. For the purposes of this regulation, Integrated Pest Management (IPM) is a process that utilizes regular monitoring to determine if and when a treatment is needed. It employs physical, mechanical, cultural, chemical, biological and educational programs to keep pest populations low enough to prevent intolerable damage or annoyance. Pesticides should be only one of many options considered for solving a pest problem, and when required, target-specific, low impact pesticides and application techniques should be employed. **Furthermore, pesticide applications are not made according to a pre-determined schedule but are only made when and where monitoring, or a previous history of pest incidence has indicated that the pest will cause unacceptable economic, medical or aesthetic damage.** The IPM program must as a result be environmentally, socially, and economically compatible to meet current public expectations.”

Section 4 (A) states:

“Applicators must undertake pest management activities using appropriate elements of integrated pest management. In all cases, any application shall be conducted in a manner to minimize exposure and human risk to the maximum extent practicable using currently available technology.”

Requests by a company that their customers automatically post the required signs and do the appropriate written notice on a certain date each month to comply with Chapter 26 because they anticipate making an application at each scheduled monthly visit, may be in contradiction to the requirements of sections 1(D) and 4(A).

Please be prepared to discuss this issue and make suggestions for development of a policy to clarify Chapter 26 or for amendments to the rule.

If you have any questions, please call or email me.