

ANNUAL DISEASE CONTROL CHEMICAL USE REPORT

PERMITTEE NAME/ADDRESS

NAME

DEPT. OF FISH & WILDLIFE - HATCHERIES

ADDRESS

600 CAPITOL WAY N

OLYMPIA, WA 98501

FACILITY

Palmer Ponds

LOCATION

32915 SE 309th St. Ravensdale, WA 98051

WAG13-3002

PERMIT NUMBER

FROM

MONITORING PERIOD		
YEAR	MO	DAY
2024	1	1

TO

YEAR	MO	DAY
2024	12	31

Chemical Used	Amount Used	Units	Notes
Terramycin (2.0 gm / lb of feed)	*	lbs of feed	
Terramycin (4.0 gm / lb of feed)	*	lbs of feed	
Terramycin (_____ gm / lb of feed)	*	lbs of feed	
Romet 30 (2.27 gm / lb of feed)	*	lbs of feed	
Romet 30 (_____ gm / lb of feed)	*	lbs of feed	
Erythromycin (2.25 gm / lb of feed)	*	lbs of feed	
Erythromycin (4.5 gm / lb of feed)	*	lbs of feed	
Erythromycin (_____ gm / lb of feed)	*	gms	
Amoxicillin	*	gms	
Chloramine - T	*	lbs	
Formalin (37% Formaldehyde)	37.23	gal	
Buffered Iodophore (1%)	*	gal	
MS-222	*	grams	
Chlorine (12.5%)	*	gals	
Chlorine (_____%)	*	gals	
Sodium Thiosulfate	*	lbs	
Quarternary Ammonia (35%)	*	gal	
KMnO4 (Potassium Permanganate)	0.36	lbs	164.1 Grams
Florfenicol	367.35	mg	24.49Kg Med Feed @ 15Mg/Kg Feed
Sodium Chloride	3750	lbs	

For other chemicals used but not able to be listed on this form, please enclose as an attachment.

* Chemicals not used.

DATE

1

15

2025

MM

DD

YY

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION. I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 11 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years.)