

Data Record Form for Spray Calculations

Experimental hut trials

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Study Code			
Hut Applied to			
Person Performing Calculations			
Date		Signature	
Study Director			
Date		Signature	

								(If applicable)	
Wall 1 maximum height (m)	Wall 1 minimum height (m)	Wall 2 maximum height (m)	Wall 2 minimum height (m)	Wall 3 maximum height (m)	Wall 3 minimum height (m)	Wall 4 maximum height (m)	Wall 4 minimum height (m)	Ceiling maximum width across (m)	Ceiling minimum width across (m)
Wall 1 maximum width (m)	Wall 1 minimum width (m)	Wall 2 maximum width (m)	Wall 2 minimum width (m)	Wall 3 maximum width (m)	Wall 3 minimum width (m)	Wall 4 maximum width (m)	Wall 4 minimum height (m)	Ceiling maximum width front to back (m)	Ceiling minimum width front to back (m)
Wall 1 maximum area (m ²)	Wall 1 minimum area (m ²)	Wall 2 maximum area (m ²)	Wall 2 minimum area (m ²)	Wall 3 maximum area (m ²)	Wall 3 minimum area (m ²)	Wall 4 maximum area (m ²)	Wall 4 minimum area (m ²)	Ceiling maximum area (m ²)	Ceiling minimum area (m ²)
Wall 1, Mean area		Wall 2, Mean area		Wall 3, Mean area		Wall 4, Mean area		Ceiling, Mean area	
Mean Area of Hut =									

Author	Date	Authorised by	Date	Version	Replacement for



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Treatment No.	Mean Area/Hut	Spray Volume/m ²	Insecticide Solution Volume/Hut	Water Required per Hut	Insecticide Volume/Hut	Application Rate

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