NORTH CAROLINA DEPARTMENT OF AGRICULTURE AND CONSUMER SERVICES

STEVE TROXLER, COMMISSIONER

FORM #1

APPLICATION FOR LICENSE/CERTIFICATE (NEW)

2012

026	**Type:** 026 Ground Pesticide Applicator **TO BE ADDED**	**12/31/2012** **Expiration Date**

◆ **Since you have passed your pesticide exam, you are eligible to be licensed** ◆

Instructions:

- The information that you provide will be used to prepare your certification card.
- Provide your name, address, phone, county, & social security number(Required)
- Sign on the line at the bottom of the page after reading the attestation statement. (Required)
- Provide your exam serial number(s)
- Application should be returned with a check or money order in the amount of $75.00 made payable to NCDA&CS. PLEASE DO NOT SEND CASH.

Please return this application with fee to:
NCDA&CS
Structural Pest Control & Pesticides Division
Licensing Unit
1090 Mail Service Center
Raleigh, NC 27699-1090
Phone: (919) 733-3556

Name:					
Company Name:					
Address:					
Address:					
City:		**State**		**Zip Code**	
Phone (Home):		**Phone (Work):**			
County:		**Social Security Number:**			
Exam Serial Number(s):					

SIGNATURE REQUIRED

No application is accepted unless signed by the applicant and accompanied by full payment.

X

APPLICANT'S SIGNATURE

FEE: $75.00

Check or money order made payable to NCDA&CS.

FOR OFFICIAL USE ONLY. DO NOT WRITE IN THIS BOX

LType: Certification Expires:

FNum: Receipt#:

For training opportunities, contact your local Cooperative Extension or visit our website: **www.ncagr.gov/pesticide**