

Steve Troxler, Commissioner

APPLICATION FOR LICENSE/CERTIFICATE (NEW)

Expiration Date

CERTIFICATION TYPE: 037 PESTICIDE DEALER

MAIL TO: N.C. Department of Agriculture & CS  
Structural Pest Control and Pesticides Div.  
1090 Mail Service Center  
Raleigh, NC 27699-1090

FORM #2

TO BE ADDED

PRINT YOUR NAME, ADDRESS AND YOUR EXAM SERIAL NUMBER IN THE SPACES BELOW.

NAME:

COMPANY NAME:

ADDRESS:

CITY:

ST:

ZIP CODE

PHONE: (Home)

PHONE: (Work)

COUNTY:

EXAM SERIAL # \_\_\_\_\_

**INSTRUCTIONS:**

\* Since you have passed your pesticide exam, you are eligible to be licensed. You must retake any failed exams.

Application(s) should be returned to us along with a check or money order made payable to NCDA & CS to cover the license fee(s). The fee per license application is \$75.00. **PLEASE DO NOT SEND CASH.**

**TOTAL AMOUNT DUE: \$75.00**

Return this original application with fee to:  
NCDA & CS, STRUCTURAL PEST CONTROL AND PESTICIDES DIVISION  
1090 MAIL SERVICE CENTER  
RALEIGH, NC 27699-1090

**SIGNATURE REQUIRED**

X \_\_\_\_\_

OFFICIAL USE ONLY