NORTH CAROLINA DEPARTMENT OF AGRICULTURE AND CONSUMER SERVICES
STEVE TROXLER, COMMISSIONER

FORM #4

APPLICATION FOR LICENSE/CERTIFICATE (NEW)

033	**Type:** 033 Public Operator (Utility) **TO BE ADDED**	

◆ **Since you have passed your pesticide exam(s), 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. ● Sign on the line at the bottom of the page. ● 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:			
E-mail:					

SIGNATURE REQUIRED

X _____

APPLICANT'S SIGNATURE

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

FEE: $75.00

Check or money order made payable to NCDA&CS.

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