

NORTH CAROLINA DEPARTMENT OF AGRICULTURE AND CONSUMER SERVICES
FORM #2 **STEVE TROXLER, COMMISSIONER**
APPLICATION FOR LICENSE/CERTIFICATE (NEW)

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| 037 | Type: 037 Pesticide Dealer <u>TO BE ADDED</u> | |
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| <p>◆ Since you have passed your pesticide exam, you are eligible to be licensed ◆</p> <p>Instructions:</p> <ul style="list-style-type: none"> ● 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. | <p>Please return this application with fee to:</p> <p>NCDA&CS Structural Pest Control & Pesticides Division Licensing Unit 1090 Mail Service Center Raleigh, NC 27699-1090 Phone: (919) 733-3556</p> |
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|---------------|-------------------------|-----------|--|
| Name: | | | |
| Company Name: | | | |
| Address: | | | |
| Address: | | | |
| City: | State: | Zip Code: | |
| Phone (Home): | Phone (Work): | | |
| County: | Social Security Number: | | |
| E-mail: | | | |

Tested Online Tested in Person

SIGNATURE REQUIRED

X

 APPLICANT'S SIGNATURE

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| No application is accepted unless signed by the applicant and accompanied by full payment. |
| FEE: \$75.00 |
| <i>Check or money order made payable to NCDA&CS.</i> |

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

DO NOT email form.

You **MUST** mail in the form with a check or money order