



Pesticide & Fertilizer Management Division Ph. 651-201-6615 Fax 651-201-6105

New License Number:

20 NEW PESTICIDE APPLICATOR LICENSE APPLICATION

Minn Stat. Sec. 18B.33 & 18B.34

The data on this form will be used to process your application. You must provide your social security number (MS Sec 270C.72). We are required by law to collect this information and we cannot grant your license without it. No one will have access to your social security number except those permitted access by law, your written consent, court order, or those department employees whose job duties require access.

Applicator Information: (Please print)

Last Name: First Name: MI: Social Security Number:

Company Information:

Legal Name:

DBA (if different):

Street Address (No PO Box): Mailing Address (if different):

City: State: Zip Code: City: State: Zip Code:

County: Company Telephone:

Financial Responsibility: (Check all that apply)

Proof of Financial Responsibility is required by the MN Pesticide Control Law (Minn. Stat. Ch. 18B) for Commercial Pesticide Applicators only. Liability Insurance Net Asset Statement Performance or Surety Bond

I am applying for a pesticide applicator license based on reciprocity. I hold a current pesticide applicator license and am a resident in the state of _____, license number _____, categories _____, expires _____

Has applicant for license/certification ever had a license or certification denied, revoked or suspended by another state? Yes No

License Categories: (Check all that apply)

- A - Core B - General Aerial C - Field Crops Pest Mgmt E - Turf and Ornamentals F - Aquatic H - Seed Treatment I - Anti-Microbial J - Nat Areas, Frstry, Rghts Of Wy K - Ag Pest Cntrl - Animal L - Mosquito Control N - Stored Grain & Fumigation O - Soil Fumigation P -Vertebrate Pest Control Q - Wood Preservatives R - Sewer Root Control M -Food Processing Pest Control S - Noncommercial Structure

Type of License and Application Fees: (Check one)

Table with 3 columns: Commercial Pesticide Applicator, Noncommercial Pesticide Applicator, Noncommercial Government Pesticide Applicator. Includes Application Fee, ACRRRA Surcharge, and Total Due.

Return this form with your check made payable to:

MINNESOTA DEPARTMENT OF AGRICULTURE ATTN: Cashier 625 Robert Street North Saint Paul, MN 55155-2538

Licenses are NOT transferable and fees are not refundable.

I hereby certify that the information contained in and submitted with this form is true and correct.

For Office Use Only

Signature: Date:

Name (Please print): Title:

Contact Telephone: Fax Number:

E-mail Address: