



# UTAH DEPARTMENT OF AGRICULTURE AND FOOD

350 N. Redwood Road

P.O. Box 146500

Salt Lake City, UT 84114-6500

(801) 538-7185 Information

(801) 538-7189 FAX

<http://ag.utah.gov>

## APPLICATION TO APPLY PESTICIDES

Receipt # \_\_\_\_\_

Amt paid \$ \_\_\_\_\_

Office Use Only

### Applicant Information:

License No. 400 - \_\_\_\_\_

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Initial \_\_\_\_\_

Mailing Address \_\_\_\_\_

Location Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ County \_\_\_\_\_

Phone \_\_\_\_\_ Cell \_\_\_\_\_ Email \_\_\_\_\_

### Employer Information:

Employer Name \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ County \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_ Email \_\_\_\_\_

☐ CEUs ☐ Reciprocal License ☐ Other \_\_\_\_\_

### Commercial (4001)

☐ 1 Year ☐ Non-Commercial (4002) ☐ Private (4003) ☐ Certification ☐ Recertification

☐ 3 Year

I hereby apply to be licensed as a pesticide applicator in Utah in one or more of the categories listed below:

#### Agriculture

Test Score

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☐ 1a. Plant \_\_\_\_\_

☐ 1b. Animal \_\_\_\_\_

☐ 2. Forest \_\_\_\_\_

☐ 3. Ornamental & Turf \_\_\_\_\_

☐ 4. Seed Treatment \_\_\_\_\_

#### Aquatic

☐ 5a. Surface Water \_\_\_\_\_

☐ 5b. Sewer Root Control \_\_\_\_\_

☐ 6. Right-of-Way \_\_\_\_\_

☐ 7. Structural \_\_\_\_\_

☐ 8. Public Health \_\_\_\_\_

Regulatory

☐ 9a. M44 \_\_\_\_\_

☐ 9b. LPC \_\_\_\_\_

☐ 10. Demonstration \_\_\_\_\_

☐ 11. Aerial \_\_\_\_\_

☐ 12. Vertebrate \_\_\_\_\_

☐ 13. Fumigation \_\_\_\_\_

☐ 14. Wood Preservation \_\_\_\_\_

☐ 15. Wood Destroying Organisms \_\_\_\_\_

I hereby certify that the information presented hereon is correct.

Signature of Applicant

Date

Examiner: