UTAH DEPARTMENT OF AGRICULTURE AND FOOD
PESTICIDE PROGRAM
350 N REDWOOD RD, PO BOX 146500
SALT LAKE CITY, UT 84114-6500
801-538-7100 | ag.utah.gov/pesticides | udaf-pesticide@utah.gov

Information in this box to be completed by UDAF;
Transaction number: _____

Amount Paid:_____

PRIVATE PESTICIDE APPLICATOR

Application for License Recertification or Certification by Reciprocation with Another State

HOW TO RENEW IN PERSON: All applicators recertifying by CEU's are to bring a COMPLETED APPLICATION and their CEU's earned to an annual UDAF-USU recertification workshop, Field Office or Compliance Specialist's office for verification and renewal. Payments will be processed online by a UDAF representative at the time of renewal, unless you do it yourself ahead of time. See instructions below.
HOW TO RENEW ONLINE: All applicators recertifying by CEU's are to scan and email a COMPLETED APPLICATION and their CEU's earned to udaf-pesticide@utah.gov. Payment can be made online at ag.utah.gov. Click on Online Services (at the top), then click Online Payments. In the "Pay For" drop down menu select "Exam for Private Pesticide Applicator", regardless if you are renewing. Complete the Applicator Information and click the Continue button. Complete the credit card or echeck information and submit your payment. Receipt will be emailed to the email noted on the second screen where payment is entered.

☐ *This application is to recertify with CEU's*. My Private Pesticide Applicators License number is 4003-*_____

I currently have (place an X in the box if applicable) ☐ **Aerial** ☐ **Fumigation** categories on my Private Pesticide Applicator License.

CEU* **The information in this box must be completed by a UDAF representative. A total of 6 CEUs are required for recertification without testing.**

Pesticide Law CEU_____ **(minimum 1)** **+ Pesticide Safety CEU** _____ **(minimum 1)** **+ Pesticide Use CEU** _____ **(minimum 1)** **=** _____ **(must total at least 6)**

CEU's must be presented at the time this application is submitted.

CEU's obtained before November 1st and turned in after December 31st will be accepted with a late of $25 until March 1st.

☐ This completed application is for a **RECIPROCAL** license from another state. Additional items needed are:
- ☐ Copy of drivers license AND copy of pesticide license (front and back on both)
- ☐ Pay for pesticide applicator license fee online at ag.utah.gov. See above instructions under "How to Renew Online".
- ☐ Email this application along with photocopies to udaf-pesticide@utah.gov
- ☐ Request Letter of Good Standing from the state the applicator has tested in to be emailed to udaf-pesticide@utah.gov

PLEASE PRINT LEGIBLY!!! * In Utah, 16 years is the minimum age for a license. *

Last Name: _____ **First Name:** _____ **Middle Initial:** _____

Mailing Address: _____

Location Address (If different from mailing): _____

City: _____ **State:** _____ **Zip:** _____ **County:** _____

Cell Phone #: _____-_____-_____ **Home Phone #:** _____-_____-_____

A VALID EMAIL IS REQUIRED TO PROCESS YOUR APPLICATION!

Email: _____

Private Pesticide Applicator - Any person or his/her employer who uses or supervises the use of any restricted-use pesticide for the purpose of producing any agricultural commodity on property owned or rented by him/her or his/her employer. Additional tests are required for Fumigation and Aerial categories on a Private Pesticide Applicator License. All other categories of a Commercial, or Non-Commercial License, are included with the Private Pesticide Applicator License.

I attest that the above information is correct, that I will adhere to all state and federal pesticide laws, that I will follow all appropriate pesticide label instructions and requirements, and that I am accountable for all pesticide application and handling actions that I perform or supervise.

Signature of Applicant for License **Date** **Confirmed by UDAF Representative**