



# UTAH DEPARTMENT OF AGRICULTURE AND FOOD

350 N. Redwood Road

P.O. Box 146500

Salt Lake City, UT 84114-6500

(801) 982-2300 Information

(385) 465-6025 FAX

UDAF-Pesticide@utah.gov

## APPLICATION FOR COMMERCIAL PESTICIDE BUSINESS LICENSE (4000)

New License       Renew Existing License      Pesticide Business License No. (if renewing): 4000 - \_\_\_\_\_

Business Name: \_\_\_\_\_

DBA: \_\_\_\_\_

Owner / Manager Name: \_\_\_\_\_

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

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

City/State/Zip \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Other Phone: \_\_\_\_\_

Email (Required): \_\_\_\_\_

Website Address: \_\_\_\_\_

A Qualifying Party is required. See the back side of this page for details.

Qualifying Party Name: \_\_\_\_\_      Applicator License No. 4001- \_\_\_\_\_

Valid Utah license       Valid reciprocal license       Education in related field

I request exemption from the Qualifying Party requirement

### Commercial Applicators Licensed in Utah

1	License No 4001- _____	Name _____	Personal Phone No. _____
	Home Address _____	Email _____	
2	License No 4001- _____	Name _____	Personal Phone No. _____
	Home Address _____	Email _____	
3	License No 4001- _____	Name _____	Personal Phone No. _____
	Home Address _____	Email _____	
4	License No 4001- _____	Name _____	Personal Phone No. _____
	Home Address _____	Email _____	
5	License No 4001- _____	Name _____	Personal Phone No. _____
	Home Address _____	Email _____	

If you have more than 5 employees, please submit additional page(s) with information.

If an employee has no license number, enter "New" in the applicator license number field.

Please return this form to the Utah Department of Agriculture and Food either by FAX at (385) 465-6025, by email to UDAF-Pesticide@utah.gov or by mail to:

Attention: Pesticide Certification  
Utah Department of Agriculture and Food  
PO Box 146500  
Salt Lake City, UT 84114-6500

Signature \_\_\_\_\_

Print Name \_\_\_\_\_

Date \_\_\_\_\_

Reset Form