



# Application for Private Pesticide Applicator License

Please complete an application for each person by typing or printing the requested information and check all boxes that apply. Then mail the completed form with a check payable to Treasurer, State of Maine to this address: Board of Pesticides Control, 28 State House Station, Augusta, ME 04333-0028

Please fill in any blanks and correct any information that has changed. Check here if anything has changed

Name \_\_\_\_\_ Email (Required) \_\_\_\_\_

Mailing Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Signature of Licensee \_\_\_\_\_ Date of Birth \_\_\_\_\_ Primary Home Phone \_\_\_\_\_

Farm Name \_\_\_\_\_ Primary Work Phone \_\_\_\_\_ Secondary Home Phone \_\_\_\_\_

Physical Location (Road, Street, Route and Number) \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

### Application For:

- Initial License \$15.00 fee
- Replace/Upgrade \$0.00
- License Renewal \$15.00

### Pesticides Used For - check major crop(s) only

- (A) Animal
- (B) Blueberry
- (C) Orchard Fruit
- (D) Potatoes
- (E) Vegetables
- (F) Forage
- (G) Grain
- (H) Small Fruit
- (I) Forestry
- (J) Greenhouse
- (K) Nursery
- (L) Private - Turf
- (M) Cranberry
- (N) Soil Fumigation
- (O) Medical Marijuana

## For Board Use Only

Initial Certification Date \_\_\_\_\_ Exam(s) \_\_\_\_\_ Fee Required \_\_\_\_\_

Check # \_\_\_\_\_ Check Date \_\_\_\_\_ Check Amount \_\_\_\_\_

License # \_\_\_\_\_ Audit # \_\_\_\_\_ Date Sent \_\_\_\_\_ Date Issued \_\_\_\_\_ New Expiration Date \_\_\_\_\_