Los Angeles County Department of
Agricultural Commissioner/Weights & Measures
12300 Lower Azusa Road, Arcadia CA 91006-5872
Tel: (626) 575-5466 Fax: (626) 443-6652

AGRICULTURAL PEST CONTROL OPERATOR 2017 ANNUAL REGISTRATION APPLICATION

COMPANY INFORMATION							
Company name:				Business License No.:			
Company address:		City:		State:		ZIP Code:	
Company mailing address:		City:		State:		ZIP Code:	
Telephone of representative:		Fax number:		E-mail address:			
Do you have employees who will be handling pesticides?							

OFFICER OR OWNERS							
Last Name:		First Name:		Title:			
Address:		City:		State:		ZIP Code:	
Last Name:		First Name:		Title:			
Address:		City:		State:		ZIP Code:	

QUALIFIED APPLICATOR *Persons designated as agent to appear and act on behalf of the applicant in matters relating to the business of pest control.*					
Last Name:		First Name:		Qualified Applicator License/Certificate No.:	
Last Name:		First Name:		Qualified Applicator License/Certificate No.:	

LICENSE TYPES

- ☐ A. Residential, Industrial and Institutional
- ☐ B. Landscape Maintenance
- ☐ C. Right-of-Way
- ☐ D. Plant Agriculture
- ☐ E. Forest
- ☐ F. Aquatic
- ☐ G. Regulatory
- ☐ H. Seed Treatment
- ☐ I. Animal Agriculture
- ☐ J. Demonstration and Research
- ☐ K. Health Related
- ☐ L. Wood Preservatives (Subcategory of A and C)
- ☐ M. Antifouling Tributyltin
- ☐ N. Sewer Line Root Control
- ☐ O. Field Fumigation
- ☐ P. Microbial
- ☐ Q. Maintenance Gardener

**Note to Maintenance Gardeners: Although a Qualified Applicator License may be used to register as a Maintenance Gardener, other categories listed on the card do not allow you to perform pest control in categories other than B, C, or Q.*

EQUIPMENT TO BE USED IN THIS COUNTY
Maintenance Gardeners should list application equipment including hand sprayer and size (2 gal., etc.). Use reverse side if necessary.

Manufacturer	Air/Ground	Equipment Type	Vehicle License or Aircraft No.	Other

I certify that all information submitted on this application for registration is accurate and complete.

X _____ / _____ / _____
Signature of Authorized Representative — Type or Print Name/Title — Date Signed

Mail completed application and required fee to:
Los Angeles County Department of
Agricultural Commissioner/ Weights & Measures
12300 Lower Azusa Road, Arcadia, California 91006-5872

For County Use Only	DR #
New Application	Application Fee
Renewal	Date Received

If you suspect fraud or wrongdoing by a County employee, please report it to the County Fraud Hotline at 1-800-544-6861 or www.lacountyfraud.org. You may remain anonymous.