



Application for Commercial Pesticide Applicator License

Please complete an application for each candidate by typing or printing the requested information and check all boxes that apply. Enclose any required reports, insurance affidavits and application for firm license. 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 _____ Date of Birth _____

Primary Phone _____ Secondary Phone _____ E-mail Address **Required** _____

Home Address _____ Town/City _____ State _____ Zip Code _____

Company or Agency _____ Federal ID # **Required** _____

Business Primary Phone _____ Business Secondary Phone _____ E-mail Address _____

Business Mailing Address _____ City _____ State _____ Zip Code _____

Signature of Licensee _____ Title _____

Signature of Owner/Manager _____ Title _____

Section 1 Application For: (Note: No fees for governmental applicators)

- Initial License \$105.00 License Renewal \$105.00
- Replace/Upgrade/Add Category \$0.00 (NO FEE)

Section 2 Qualification For: (Note: Does not apply to Household Pet, Antifouling Paint, or Post Harvest Treatment applicators.)

- Operator Master

Section 3 Type of License:

- Governmental Custom Applicator for Hire Custom Applicator not for hire

Please turn over and complete other side

**Company / Agency owner, manager or master must complete Section 4.
"For hire" Companies must complete Section 5.**

Section 4a Annual Summary Reports

- Have been submitted
- Are enclosed
- None performed

Section 4b Insurance Affidavit

- Affidavit enclosed
- Previously submitted
- Not required (not for hire)

Section 5 Type of Company: ("For hire" companies only)

Section 5a Only apply pesticides on or within a premises which is company owned or leased
(This type of company need not apply for a firm license.)

Section 5b Sole Proprietor with NO employees that apply pesticides
(This type of company need not apply for a firm license.)

Section 5c Sole Proprietor with employees that apply pesticides
 Incorporated Partnership LLC
(These companies must include an application for a firm license)

For Board Use Only

Fee Required _____ Fee Paid _____

Check # _____ Check Date _____ CheckAmount _____

Date Tested _____ Exam(s) _____

Certification Expiration Date _____ Category(ies) _____

Extend Certification To _____ Master Applied _____

Company License # _____ Insurance Affidavit _____ Spray Rpt _____

License Type License # _____ Pay # _____ Apply # _____ Issue Date _____ New Expiration Date _____