Think First...

Application for General Use Pesticide Dealer License

22 MRSA 1471-W requires licensing of companies which distribute general use pesticides in the State of Maine. A copy of this law is enclosed. If you intend to distribute pesticides other than those listed in the exemptions, please type or print the requested information and check all boxes that apply. Then mail the completed application 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 corre	ct any information that has change	d. Check h	ere if anythii	ng has changed.	
Company Name		Federal ID #	Required		
Headquarters Address (if applies)	City		State	Zip Code	
Main Physical Location (If applies)	City	_	State	Zip Code	
Business Mailing Address	City		State	Zip Code	
Person F	Responsible For Sale or Dis	stributio	n of Pesti	cides	
Company Contact Name	Company Telephone Number	r Ext (Company E-mai	il Address	
Branch Contact Name	Branch Telephone Number	Ext E	Branch E-mail A	Address	
Application For:	Initial License \$20.00 fee (No Repo		te sales report :	status section)	
Type of Business: Sales Report Status: Required: Check One	Wholesale Reta Report is Enclosed No Pesticides Sold or Offered for S No Reportable Sales		Both		
Plant Incorporated Prot Required: Check One		ibute plant-in	corporated pro	tectants, e.g., Bt Field Co	orn
Please list all companies	s from which you receive pes	ticides (N	lame, Add	ress and Phone	Number):

Continued on back...

Please list all co	mpanies to which you d	listribute pesticid	es (Name, Addre	ess and Phone Number	er):
	F	or Board Use O	nly		
Check Number	Check Date		Check Amount		
Sales Report					
License ID	Audit Number	Date Sent	Issue Date	Expiration Date	