STATE OF ALABAMA
DEPARTMENT OF AGRICULTURE AND INDUSTRIES
Pesticide Management - Certification Unit

1445 Federal Drive • Montgomery, Alabama 36107-1123
(334) 240-7240 • 1-800-642-7761, Ext. 7240

REQUEST FOR CHANGE OF INFORMATION FOR PESTICIDE APPLICATOR LICENSE

Complete your name and permit information plus other sections as needed to update your file.

Legal Name: _____
Last First Middle Suffix

Permit Type: ☐ Private ☐ Commercial ☐ Custom ☐ Professional Permit #_____

Date of Birth:_____ Last 4 digits of SSN: _____

Home Email Address: _____

Business Email Address: _____

Home Address: _____ Home Phone: _____

_____ Home Phone 2: _____

_____ Home Fax: _____

Mailing Address: _____ Cell Phone: _____

_____ Pager/Beeper: _____

_____ Business Phone: _____

_____ Business Headquarters Phone:

Business Name & Address: _____ _____

_____ Business Fax: _____

_____ Other Phone/Fax: _____

_____ Description: _____

(Include area code with all phone numbers)

I AM REQUESTING AN IMMEDIATE CHANGE TO THE INFORMATION LISTED ABOVE FOR PESTICIDE APPLICATOR LICENSE FILE.

Signature: _____ Date: _____

*****MUST BE SIGNED AND DATED*****

ADAI - 2015