



John McMillan
Commissioner

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



APPLICATION FOR
COMMERCIAL PESTICIDE APPLICATOR PERMIT

FOR: RENEWAL/Expired PERMIT # _____ EXPIRATION DATE: _____

I understand and will comply with the provisions of the below laws and rules, as well as product label instructions. Further I understand that any violation of the laws, rules, or label instructions constitutes grounds for suspension or revocation of the permit and other penalties.

Legal Name _____ SSN XXX - XX - ____ Date of Birth _____
Home Address _____ City _____ County _____ State _____ Zip _____
PO Box _____ City _____ State _____ Zip _____ Phone 1: (____) _____ - _____ Phone 2: (____) _____ - _____
Employer _____ Phone (____) _____ - _____
Address _____ City _____ State _____ Zip _____ -
PO Box _____ City _____ State _____ Zip _____ -
E-Mail _____

I hereby apply for a permit as a Commercial Pesticide Applicator to purchase and use pesticides Pursuant to CHAPTER 27, TITLE 2, CODE OF ALABAMA (1975) and CHAPTER 80-1-13, ALABAMA ADMINISTRATIVE CODE.

Certification Requested in Category(ies):

- Ag. Commodity Fumigation (ACF)
- Agricultural Animal Pest Control (AA)
- Agricultural Plant Pest Control (AP)
- Aerial Equipment (AIR)
- Ground Equipment (GRND)
- Aquatic Pest Control (AQ)
- Biocides (BIO)
- Demonstration & Research (D&R)
- Forest Pest Control (FOR)
- Public Health Pest Control (PH)
- Metam Sewer (MS)
- Regulatory (REG)
- Right-of-Way Pest Control (ROW)
- Seed Treatment (ST)
- Tributyltin (TBT)
- Wood Treatment (WT)

I hereby apply for a permit as a Commercial Pesticide Applicator to purchase and use pesticides Pursuant to CHAPTER 28, TITLE 2, CODE OF ALABAMA (1975) and CHAPTER 80-1-13, ALABAMA ADMINISTRATIVE CODE.

Certification Requested in Category(ies):

- Household Pest Control (HPC)
- Wood Destroying Organisms (WDC)
- Fumigation Pest Control (FC)
- Ornamental & Turf Pest Control/
Supervisor (OTPS)
- Household Pest Control (HPB)
- Wood Destroying Organisms (WDS)
- Fumigation Pest Control (FB)

CUSTODIAL CATEGORIES:

- Ornamental & Turf/CUSTODIAL (OTPC)
- Industrial, Institutional & Health-
Related/CUSTODIAL (IIHC)

RECERTIFICATION FOR EXPIRED PERMIT:

Date Passed Recertification Exam. ____/____/____

PERMIT FEE \$45.00 FOR EACH CATEGORY MUST ACCOMPANY THIS APPLICATION. PLEASE MAKE CHECK PAYABLE TO:
AL DEPT OF AGRICULTURE & INDUSTRIES

**RETURN TO: DEPARTMENT OF AGRICULTURE & INDUSTRIES
PESTICIDE MANAGEMENT--CERTIFICATION UNIT
1445 FEDERAL DRIVE
MONTGOMERY, AL 36107-1123**

Signature of Applicant

DO NOT WRITE BELOW THIS LINE

Certification Permit No. _____ Amount Paid: _____ Check # _____
Expiration Date: _____ Date Issued: _____



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ALABAMA DEPARTMENT OF AGRICULTURE AND INDUSTRIES
DECLARATION OF CITIZENSHIP OR LEGAL STATUS FOR INDIVIDUALS SEEKING
PUBLIC BENEFITS

As of January 1, 2012, Section 7 of the BEASON-HAMMON ALABAMA TAXPAYER AND CITIZEN PROTECTION ACT (the "Act"), Act No. 2011-535, requires that the Alabama Department of Agriculture & Industries ("ADAI") obtain a declaration from any person applying for a "state or local public benefit," as that term is defined in 8 U.S.C. § 1621, that said person is a United States Citizen or an Alien lawfully present in the United States. 8 U.S.C § 1621 (c) (A) defines "state or local benefit" as:

"Any grant, contract, loan, professional license, or commercial license provided by an agency of a State or local government or by appropriated funds of a State or local government..."

Sections 7 (h) and (i) of the Act provide that any person who knowingly makes a false, fictitious, or fraudulent statement or representation in a declaration regarding citizenship or lawful status shall be guilty of perjury in the second degree pursuant to section 13A-10-102, Code of Alabama 1975.

As a result, you must complete and sign the following declaration before ADAI can issue your license, permit, or certification:

I, _____ (print your name), declare under penalty of perjury, that I am a United States Citizen or an alien lawfully present in the United States.

Signature

Date