

**APPLICATION FOR A RESTRICTED USE DEALER'S LICENSE**

**Alabama Dept. of Agriculture and Industries, Pesticide Management Section  
1445 Federal Drive, Montgomery, Alabama 36107**

Application is hereby made to the Commissioner of Agriculture & Industries of the State of Alabama for a Restricted Use Pesticide Dealer's License to market and/or distribute pesticide designated by the Commissioner to be Restricted Use Pesticides.

Application submitted by \_\_\_\_\_  
Firm name Phone Number

\_\_\_\_\_  
Firm Street Address Firm Post Office Box City State Zip Code

The person who shall be responsible for maintaining proper records must be certified.

\_\_\_\_\_  
Certified Person Date Dealer Exam was taken

Business owned by \_\_\_\_\_  
Parent Company Phone Number

\_\_\_\_\_  
Parent Company Street Address Parent Company Post Office Box City State Zip Code

Business e-mail address \_\_\_\_\_

**NOTE:** A Dealer who markets and/or distributes restricted use pesticides shall pay a fee of \$45.00 per year. License period is January 1 through December 31, and must be renewed annually. A penalty of 10% is due after February 15. **MAKE CHECK PAYABLE TO THE ALABAMA DEPARTMENT OF AGRICULTURE AND INDUSTRIES.**

It is understood and hereby agreed that should this license be issued, applicants shall abide by the requirements of Section 2-27-1 through 2-27-16, Code of Alabama (1975) and all rules and regulations promulgated there under relating to the storing, transporting, advertising and marketing of Restricted Use Pesticides. It is further understood and agreed that applicant shall cause to be faithfully kept and maintained such records and books prescribed by the Commissioner and shall present such records and books for the review and examination by the Commissioner or his authorized representative during normal business hours.

\_\_\_\_\_  
Applicant's Authorized Representative Signature Date

**DO NOT WRITE BELOW THIS LINE**

Dealer License number \_\_\_\_\_ License Fee \_\_\_\_\_  
Delinquent Penalty \_\_\_\_\_  
Total \_\_\_\_\_  
Check No. \_\_\_\_\_  
Date \_\_\_\_\_

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