



ALABAMA DEPARTMENT OF AGRICULTURE & INDUSTRIES

APPLICATION FOR PRIVATE APPLICATOR PERMIT

I hereby apply for a permit as a Private Applicator to purchase and use restricted-use pesticides pursuant to Chapter 27, Title 2, Code of Alabama (1975) and Chapter 80-1-13, Alabama Administrative Code. I understand and will comply with the provisions of the above statutes and rules, as well as product label instructions. **Further, I understand that any violation of the statutes, rules, or label instructions constitutes grounds for suspension or revocation of permit, and other penalties.**

PLEASE PRINT

Check one: { } New Application { } Renewal Application

_____ <i>Last name</i>	_____ <i>First Name</i>	_____ <i>Middle Name</i>	_____ <i>SSN (last 4 digits)</i>
_____ <i>Home Address</i>	_____ <i>City</i>		_____ <i>Date of Birth</i> ()
_____ <i>County</i>	_____ <i>State</i>	_____ <i>Zip Code</i>	_____ <i>Telephone Number</i>

➤ **Mailing address:** { } Same as above **OR** as follows:

_____ <i>Street Address</i>	_____ <i>City</i>	_____ <i>State</i>	_____ <i>Zip</i>
--------------------------------	----------------------	-----------------------	---------------------

Email Address: _____

SEND APPLICATION AND CERTIFICATE OF COMPLETION VIA EMAIL OR U.S. MAIL. DO NOT INCLUDE A CHECK AS YOUR ONLINE FEE INCLUDED THE PERMIT FEE. SEE BELOW FOR INSTRUCTIONS.

➤ **EMAIL:** **Along with this application, you must submit the **CERTIFICATE** provided by the online training platform from Alabama Cooperative Extension System. *Send your completed application and your certificate of completion. Email both documents to private@agi.alabama.gov. PLEASE TYPE THE WORDS "PRIVATE APPLICATOR" AND YOUR NAME IN THE SUBJECT LINE OF YOUR EMAIL.***

➤ **MAIL:** Department of Agriculture and Industries
Pesticide Management ~ Private Applicator
1445 Federal Drive
Montgomery, AL 36107-1123

I understand that this permit is valid only for purchasing, using, or supervising the use of restricted use pesticide(s) on property owned/leased/controlled by me or by a full-time employee for the purpose of producing agricultural commodities. My signature is to attest that I have read and understand the rules and regulations of a private applicator.

Signature of Applicant _____ **Date** _____

*****DO NOT WRITE BELOW THIS LINE*****

THIS SECTION FOR ADAI OFFICE USE ONLY

Permit Number

Issue Date _____ GRADE: Passed

CK/MO # _____ Amt Paid \$ _____