

PEST CONTROL BUSINESS COUNTY REGISTRATION



MERCED COUNTY AGRICULTURAL COMMISSIONER'S OFFICE

2139 WARDROBE AVE., MERCED, CA 95340

FOR REGISTRATION IN COUNTY OF:		REGISTRATION EXPIRATION DATE: DECEMBER 31, _____ (YEAR)	
BUSINESS NAME:		BUSINESS LICENSE NO:	
BUSINESS ADDRESS:		BUSINESS LOCATION: <input type="checkbox"/> MAIN <input type="checkbox"/> BRANCH	
CITY:	STATE:	ZIP CODE:	TELEPHONE NUMBER:
CELL PHONE OR EMERGENCY CONTACT NUMBER:		FAX NUMBER:	
QUALIFIED APPLICATOR'S SIGNATURE:		DATE:	
Restricted Material(s) Possession Permit No. _____ No restricted material may be possessed except in accordance with any attached condition(s). This is not a permit to apply.		CONDITION(S) ATTACHED: <input type="checkbox"/> YES <input type="checkbox"/> NO	
OFFICE USE ONLY			
AGRICULTURAL COMMISSIONER'S SIGNATURE: DAVID ROBINSON BY		DATE:	REGISTRATION FEE RECEIVED: \$ _____ <input type="checkbox"/> CASH <input type="checkbox"/> CHECK# _____ RECEIPT# _____ <input type="checkbox"/> CREDIT CARD

PLEASE ATTACH:

1. COPY OF PEST CONTROL BUSINESS LICENSE.
2. COPY OF EQUIPMENT LIST.
3. COPY OF QAL CARD.
4. COPY OF DOCTOR'S MEDICAL SUPERVISION AGREEMENT (IF APPLICABLE)

**Merced County Permit Conditions are available at: <http://www.co.merced.ca.us/index.aspx?nid=2254>

STATE OF CALIFORNIA
**APPLICATION FOR PEST CONTROL
 EQUIPMENT REGISTRATION**

DEPARTMENT OF PESTICIDE REGULATION
 PESTICIDE ENFORCEMENT BRANCH

PR-ENF-058 (REV. 4/95)

_____ COUNTY

FOR CALENDAR YEAR ENDING DECEMBER 31, _____

NAME - (under which applicant is engaged in business)

LIST BELOW ALL EQUIPMENT TO BE USED IN THIS COUNTY. INDICATE APPLICABLE TYPE OF EQUIPMENT: FOR AIRCRAFT, SHOW FIXED WING OR HELICOPTER. FOR GROUND, SHOW SPEED SPRAYER, POWER DUSTER, HAND GUN, ETC.

MANUFACTURER	AIR	GROUND	EQUIPMENT TYPE	VEHICLE LIC. OR AIRCRAFT "N" NO.	OTHER I.D.
1.	<input type="checkbox"/>	<input type="checkbox"/>			
2.	<input type="checkbox"/>	<input type="checkbox"/>			
3.	<input type="checkbox"/>	<input type="checkbox"/>			
4.	<input type="checkbox"/>	<input type="checkbox"/>			
5.	<input type="checkbox"/>	<input type="checkbox"/>			
6.	<input type="checkbox"/>	<input type="checkbox"/>			
7.	<input type="checkbox"/>	<input type="checkbox"/>			
8.	<input type="checkbox"/>	<input type="checkbox"/>			
9.	<input type="checkbox"/>	<input type="checkbox"/>			
10.	<input type="checkbox"/>	<input type="checkbox"/>			
11.	<input type="checkbox"/>	<input type="checkbox"/>			
12.	<input type="checkbox"/>	<input type="checkbox"/>			
13.	<input type="checkbox"/>	<input type="checkbox"/>			
14.	<input type="checkbox"/>	<input type="checkbox"/>			
15.	<input type="checkbox"/>	<input type="checkbox"/>			
16.	<input type="checkbox"/>	<input type="checkbox"/>			
17.	<input type="checkbox"/>	<input type="checkbox"/>			
18.	<input type="checkbox"/>	<input type="checkbox"/>			
19.	<input type="checkbox"/>	<input type="checkbox"/>			
20.	<input type="checkbox"/>	<input type="checkbox"/>			

I HEREBY CERTIFY THAT MY GROUND EQUIPMENT IS PROPERLY MARKED AND THAT THE INFORMATION CONTAINED IN THIS APPLICATION IS TRUE AND CORRECT.

SIGNATURE

DATE