

# APPLICATION FOR CERTIFICATE TO OPERATE AS A PRIVATE APPLICATOR

Application No.: \_\_\_\_\_

1. Name of applicant: \_\_\_\_\_

2. Address of applicant: \_\_\_\_\_

3. Date of birth: \_\_\_\_\_

4. Telephone: Business: \_\_\_\_\_

Home: \_\_\_\_\_

5. Name and address of employer: \_\_\_\_\_

6. Address where pesticides are stored: \_\_\_\_\_

7. Address where Pesticides are to be applied: \_\_\_\_\_

8. Method of disposal of containers of Pesticide: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
*Signature of Applicant*

\_\_\_\_\_  
*Date*

## FOR OFFICIAL USE ONLY

1. Date of application \_\_\_\_\_

2. Number of certificate \_\_\_\_\_

\_\_\_\_\_  
*Signature of Registrar*

\_\_\_\_\_  
*Date*