



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:** FIRST PERMIT  **FOR:** ADDING ON NEW CATEGORY  **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.

**Date Passed Exam: Certification Requested in Category(ies):**

___/___/___	Ag. Commodity Fumigation (ACF).....	<input type="checkbox"/>
___/___/___	Agricultural Animal Pest Control (AA).....	<input type="checkbox"/>
___/___/___	Agricultural Plant Pest Control (AP).....	<input type="checkbox"/>
___/___/___	Aerial Equipment (AIR).....	<input type="checkbox"/>
___/___/___	Ground Equipment (GRND).....	<input type="checkbox"/>
___/___/___	Aquatic Pest Control (AQ).....	<input type="checkbox"/>
___/___/___	Demonstration & Research (D&R).....	<input type="checkbox"/>
___/___/___	Forest Pest Control (FOR).....	<input type="checkbox"/>
___/___/___	Public Health Pest Control (PH).....	<input type="checkbox"/>
___/___/___	Metam Sewer (MS).....	<input type="checkbox"/>
___/___/___	Regulatory (REG).....	<input type="checkbox"/>
___/___/___	Right-of-Way Pest Control (ROW).....	<input type="checkbox"/>
___/___/___	Seed Treatment (ST).....	<input type="checkbox"/>
___/___/___	Wood Treatment (WT).....	<input type="checkbox"/>

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.

**Date Passed Exam: Certification Requested in Category(ies):**

___/___/___	Household Pest Control (HPC).....	<input type="checkbox"/>
___/___/___	Wood Destroying Organisms (WDC).....	<input type="checkbox"/>
___/___/___	Fumigation Pest Control (FC).....	<input type="checkbox"/>
___/___/___	Ornamental & Turf Pest Control/ Supervisor (OTPS).....	<input type="checkbox"/>
___/___/___	Household Pest Control (HPB).....	<input type="checkbox"/>
___/___/___	Wood Destroying Organisms (WDS).....	<input type="checkbox"/>
___/___/___	Fumigation Pest Control (FB).....	<input type="checkbox"/>

**CUSTODIAL CATEGORIES:**

___/___/___	Ornamental & Turf/CUSTODIAL (OTPC).....	<input type="checkbox"/>
___/___/___	Industrial, Institutional & Health- Related/CUSTODIAL (IIHC).....	<input type="checkbox"/>

**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