



Florida Department of Agriculture and Consumer Services
Division of Agricultural Environmental Services

Submit to:
Pesticide Certification Section
3125 Conner Blvd., Bldg. 8, L8
Tallahassee, FL 32399-1650

NOTIFICATION OF EXAMINATION RESULTS

Section 487.044, F.S. and Rule 5E-9.026(4), F.A.C.

ADAM H. PUTNAM
COMMISSIONER

Telephone: (850) 617-7870; FAX (850) 617-7895

Please Print

Exam Site: Exam Administrator: Exam Date

All questions must be answered. Use "None" or "N/A" (not applicable) if appropriate.

1. Legal Name: Last First Middle Suffix (Jr., Sr., etc.) Nickname (optional)

2. Date of Birth (month, day, year)

3. Home Address (physical address)

City State Zip Code
County

4. Mailing Address (if different from home)

City State Zip Code
County

5. Home Phone

6. E-mail Address

7. This request is for: New license Additional category License renewal 8. License #: Exp. Date:

9. License type requested: Private RUP Public RUP Commercial RUP Public Health No license requested/adding a category

10. Application sites (crops, right-of-ways, golf course, etc.):

11. Will this license be used in conjunction with your employment? Yes No

Please Note: If applying for a public license, proof of employment by a government entity may be required.

12. Is your employer a government entity? (examples: DOT, county parks and recreation, etc.) Yes No

13. Name of Employer or Business

14. Business Address City State Zip Code County

15. Business Phone No. (with area code)

16. Cell Phone No. (with area code)

17. I understand that passing the certification exams does not authorize me to purchase or apply restricted use pesticides (RUPs). A license must be issued to authorize RUP purchase and application.

Signature

Date

NOTE: EXAM RESULTS ARE VALID FOR ONE YEAR FROM THE DATE OF EXAM.
IF LICENSE HAS NOT BEEN ISSUED WITHIN ONE YEAR FROM EXAM DATE, EXAM(S) MUST BE RETAKEN.

DO NOT WRITE IN THIS BLOCK - OFFICIAL USE ONLY

- Aerial Demo/Research Public Health Sewer Root Control
Ag Animal Forestry Raw Ag Comm Fum Soil/Greenhouse Fum
Ag Row Crop Natural Areas Regulatory Wood Treatment
Ag Tree Crop Organotin Paint Reg Insp/Samp WPS Crop Advisor Exemption
Aquatic Ornamental/Turf Right-of-Way General Standards *(Core)*
Chlorine Gas Private Appl Ag Seed Treatment P=Pass F=Fail

Signature of FDACS Official Grading Exams Date

Original: Pesticide Certification Section

Copies: Exam Administrator and Examinee

Instructions for Completing Form

Clearly print all the information for each item except your signature. Sign in the signature block (#17). Be sure to complete every item. Use "None" or "N/A" (not applicable) if appropriate. Signature is required for exam scores to be valid.

1. Your complete legal name (required) and nickname (optional).
2. Your birth date (required to verify age qualification for license).
3. Your complete home address, including your county of residence. Please do not give a P.O. box as your home address.
4. Your complete mailing address, including county.
5. Your home telephone number.
6. Your e-mail address.
7. Please indicate if you are testing to obtain a new license, add a category to an existing license, or renew an existing license.
8. If you have a pesticide applicator license (current or expired), indicate the license number. If none, write "None."
9. Check the license type you are requesting. If adding a category, check "Not Applicable." RUP=Restricted Use Pesticide.

Items 10, 11, 12, and 13 will be used to help determine the license type you need.

10. Give a brief description of **where** you will be applying restricted use pesticides. Examples: citrus application--my own groves; citrus application--groves I care take for others; golf course; plant nursery--at place of employment; roadsides/rights-of-way--contract to DOT; roadsides--for employer (DOT); wetland areas--for work at state park, etc.
11. If this license will be used to make or supervise restricted use pesticide applications as part of your employment, check "YES". If your license will be used for a purpose other than for your work, check "NO".
12. If your employer is a government entity, check "YES". If your employer is not a government entity, check "NO".
13. The name of your employer or your own business (if self employed).
14. Your complete business address, including county (at place of employment).
15. Your business telephone number (at place of employment).
16. Your cell phone number.
17. Your signature and the date (required).

Definitions

Private Applicator - This is someone aged 18 or older who uses or supervises the use of restricted use pesticides to grow some type of agricultural product, such as field crops, vegetables, citrus, tree fruits or nuts, nursery plants, sod, timber, livestock, catfish, etc. in their own business or for their employer. The restricted use pesticide applications must be made to property owned or leased by the private applicator or his/her employer. No contract applications may be made with this license. However, applications may be made to the property of another agricultural producer if the pesticide is applied without compensation other than the trading of personal services between producers of agricultural commodities. This license is not valid for making applications to maintain lawns or landscape ornamental plants, including those at the private applicator's residence.

Public Applicator - This is someone aged 18 or older who uses restricted use pesticide as part of his/her job while employed by a government agency or entity. The employer may be a federal agency, state agency or institution, county government, municipal corporation, city government, or any other government entity. The type of work may involve any agricultural or other outdoor pesticide application. Exceptions: this license type does not cover public health pest control (mosquitoes, biting flies, etc.) or pest control on lawns and ornamentals associated with buildings. Examples of application sites covered by this license: all of the agricultural areas mentioned above for private applicators; lakes and other aquatic sites; right-of-way areas; sewer lines for root control; ornamentals and turf not associated with buildings; seed treatment; wood treatment; boat bottoms (antifouling paint); etc. This license is not valid for application to buildings for structural pest control or for control of pests on lawns and ornamentals immediately surrounding (within 10 feet of) any building.

Commercial Applicator - This is someone aged 18 or older who makes contract applications of restricted use pesticides on agricultural sites (see list above under private applicator) or contract or employment-related applications to non-agricultural outdoor sites such as golf courses, parks, and cemeteries; ornamentals and turf not immediately associated with buildings; recreational lakes and other aquatic sites; right-of-way areas; sewer lines for root control; seed treatment; wood treatment; boat bottoms (antifouling paint); etc. This license is not valid for application to buildings for structural pest control or for control of pests on lawns and ornamentals immediately surrounding (within 10 feet of) any building. A commercial applicator license may substitute for a private or public applicator license if desired, but liability issues should be taken into consideration.