

Application for Duplicate Applicator License/Certification

This application may only be used for current license holders and may NOT be used in place of a New License/Certification or Renewal Application.

License Holder			
Type <i>(check only one)</i>			
Commercial Pesticide Applicator	Private Pesticide Applicator		
Non-Commercial Pesticide Applicator	Commercial Animal Waste Technician - Applicator		
Non-Commercial Pesticide Applicator <i>(Government)</i>	Commercial Animal Waste Technician - Site Manager		
Reason for Duplicate License/Certification			
Adding Category <i>(Please select from categories below)</i>		Lost or Misplaced License/Certification	
Update Reciprocal Information <i>(A copy of your resident state pesticide license <u>and</u> driver's license is required)</i>			
Other <i>(Please explain)</i>			
A – Core	J – Nat Areas, Frstry, Rghts Of Wy	P – Vertebrate Pest Control	
B – General Aerial	K – Ag Pest Control - Animal	Q – Wood Preservatives	
C – Field Crops Pest Management	L – Mosquito, Black Fly, & Ticks	R – Sewer Root Control	
E – Turf and Ornamentals	M – Food Processing Pest Management	S – Non-Commercial Structural	
F – Aquatic	<i>(Non-Commercial Only)</i>	<i>(Non-Commercial Only)</i>	
H – Seed Treatment	N – Non-Soil Fumigation	Liquid	
I – Anti-Microbial	O – Soil Fumigation	Solid	
Application/Certification Fees <i>(Check only one)</i>			
Commercial Pesticide Applicator <i>(M.S. 18B.33)</i>	\$10.00	600306(3110)	
Non-Commercial Pesticide Applicator <i>(M.S. 18B.34)</i>	\$10.00	600310(3110)	
Non-Commercial Government Pesticide Applicator <i>(M.S. 18B.34)</i>	\$10.00	600314(3110)	
Private Pesticide Applicator <i>(M.S. 18B.36)</i>	\$ 5.00	600315(3110)	
Commercial Animal Waste Technician - Applicator <i>(M.S. 18C.430)</i>	\$10.00	600301(3111)	
Commercial Animal Waste Technician - Site Manager <i>(M.S. 18C.430)</i>	\$10.00	600301(3112)	
<p>Return this form with your check made payable to: Minnesota Department of Agriculture ATTN: Cashier 625 Robert Street North Saint Paul, MN 55155-2538 Licenses are NOT transferable and fees are NOT refundable.</p>			
I hereby certify that the information contained in and submitted with this form is true and correct.			
Signature:	Date:	For Office Use Only	
Name <i>(Please print)</i> :			
Title:			
Phone:	Fax:		
Email:	Date Processed:		