



County of Humboldt  
Department of Agriculture  
Weylan Shaw  
Agricultural Commissioner/  
Sealer of Weights & Measures

## Pest Control Business Registration

For Registration in the **County of Humboldt**  
Registration expiration date: **December 31, 20**\_\_\_\_\_  
\$25.00 Registration Fee

Registration Fee Received: \$\_\_\_\_\_  
(Submit all pages with appropriate fees and signatures)

### Business Information:

Business Name

Business License Number

Mailing Address, City, State, Zip Code

Physical Address, City, State, Zip Code (if different than above)

Business Phone Number

Fax Number

Business Email

### Qualified Applicator Information:

Qualified Applicator Name

Qualified Applicator License Number

Phone Number

Cell Phone Number

Email Address

### Restricted Materials Information:

Possession Permit Number

Restricted material condition(s) must be attached. No restricted materials may be possessed except in accordance with any attached condition(s). This is not a permit to apply.

### Signatures:

Qualified Applicator's Signature

Date

Agricultural Commissioner's Signature

Date

### Department Use Only

- |  |   |
|--|---|
| <input type="checkbox"/> Copy of valid business license (DPR)                      | <input type="checkbox"/> Restricted Materials Condition(s)    |
| <input type="checkbox"/> Copy of QAL Card  | <input type="checkbox"/> Invoice                              |
| <input type="checkbox"/> Copy of signed and dated equipment list                   | <input type="checkbox"/> Registration entered in CalAgPermits |
| <input type="checkbox"/> Copy of current FAA medical Certificate (for pilots only) |   |

Staff initials: \_\_\_\_\_

**APPLICATION FOR PEST CONTROL  
EQUIPMENT REGISTRATION**

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 NO.	OTHER I.D.
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
17					
18					
19					
20					

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

SIGNATURE

DATE