

Oklahoma Department of Agriculture, Food, & Forestry

PO Box 528804

Oklahoma City, OK 73152-8804

Phone: (405) 522-5950 or Fax: 405-522-0625

<http://www.ag.ok.gov/cps-pest.htm>

New

Renewal

Please **TYPE** or **PRINT** clearly

Office Use ONLY	
Revenue Code	414
Receipt #	
Fee \$	
Expires	12/31/2018
County Code	
Test Score	
Issue Date	
ID #	
License #	

# Private Applicator License Application

Name \_\_\_\_\_

First

Middle

Last

Mailing Address \_\_\_\_\_

City/State \_\_\_\_\_ 9-Digit Zip Code \_\_\_\_\_ - \_\_\_\_\_

Property address \_\_\_\_\_

City/State \_\_\_\_\_ 9-Digit Zip Code \_\_\_\_\_ - \_\_\_\_\_

Legal Description of Property Address \_\_\_\_\_

County \_\_\_\_\_ Phone \_\_\_\_\_

Please Check All That Apply:

Cattle       Hay Production       Peanuts       Sheep       Other (Please Specify)

Corn       Hogs       Pecans       Small Grains \_\_\_\_\_

Cotton       Horses       Poultry       Soybeans \_\_\_\_\_

Forest Products       Orchard       Seed Production       Truck Crops

Fumigants - closed book, written fumigation exam and practical required.

Do full-time or part-time workers or family members apply pesticides for the production of Agricultural Plants?  Yes  No

If yes: Number of family members \_\_\_\_\_ Number of workers other than family members \_\_\_\_\_

I hereby apply for a Private Applicators License to allow me to use or supervise the use of any restricted pesticides for purposes of producing any agricultural commodity on property owned or rented by me or my employer or, if applied without compensation other than trading of personal services between producers of agricultural commodities, on the property of another person.

In order to **RECEIVE** your **LICENSE** you **MUST**:

1. Complete and return this form along with:

2. **A \$20 license fee.**

Make checks payable to the Oklahoma Department of Agriculture, Food, & Forestry or ODAFF.

This license shall be valid through December 31st, 2018.

3. Submit the properly completed answer sheet. Minimum passing score is 70%.

\_\_\_\_\_  
Date

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