



**Pest Control Business /
Maintenance Gardener
County Registration**
Phone: (707) 784-1310
Pesticide Email: PUE@SolanoCounty.com

Mailing Address:
Solano County Ag. Dept.
675 Texas Street
Fairfield, CA 94533

Physical Address:
Solano County Ag. Dept.
2543 Cordelia Road
Fairfield, CA 94534

Registration Year: _____		QAC / QAL Card	
<input type="checkbox"/> Pest Control Business – \$106.00 <input type="checkbox"/> Maintenance Gardener – \$25.00			
Restricted Material(s) Permit No. _____ No restricted Material may be possessed except in accordance with any attached condition(s). This is not a permit to apply. Conditions attached: <input type="checkbox"/> yes <input type="checkbox"/> no			
Payment type: <input type="checkbox"/> Cash <input type="checkbox"/> Credit <input type="checkbox"/> Check, CK# _____			
Business Name:		Phone Number:	
Business address	City	State	Zip
Business Email:			
Qualified Licensed Applicator's Signature		Date	
Agricultural Commissioner's Signature For <i>Ed King</i> :		Date	

Please Place a Photocopy of DPR issued
Maintenance Gardener License or
Pest Control Business License Here

APPLICATION FOR PEST CONTROL EQUIPMENT REGISTRATION



FOR CALENDAR YEAR ENDING DECEMBER 31, _____

Company Name: _____

*****NOTE: EQUIPMENT LIST SHOULD BE PROVIDED WITH ALL PCB REGISTRATIONS**

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 Vehicle "N" No.	Other ID

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

_____ Signature

_____ Date