Department of Pesticide Regulation Licensing and Certification Program Web site: http://www.cdpr.ca.gov

Private Applicator Certificate Application

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For complete instructions, see page 2. If yo			g this application, please contac al county agricultural commissio		ricultural	l commissi	ioner's o	office. Turn	
A. Application Type. Check the appropriate bo	x(es).								
New Applicant (Practical Knowledge Exar	n)	Renewal (F	Private Applicator Certificate Numb	er)					
Add Burrowing Vertebrate Pest Fumigation	n Exam	Renev	w Burrowing Vertebrate Pest Fumigation	Certificate					
B. Applicant Information. Relationship to agric	ultural production	n operation. (Ched	ck appropriate box)						
			norized Representative h letter from property owner / operator)			Employee			
Operator or Business Name		Cell or Home Phone Number							
Applicant Name (Last)	(Fi	(First) (Middle Initi			I am at least 18 years of age.				
Work Phone Number	E-1	Mail Address							
Applicant Mailing Address (Number and Street or PC	Box)		(City)	(County)		(State)	(ZIP Co	de)	
C. Continuing Education Information. Attach	the certificate of o	completion for eac	ch course.						
Course Title			DPR Course I.D.Code	Date(s) Atter	Date(s) Attended		Total Hours		
						Laws ar Regulation		Other	
Denial (Reason)									
D. I declare under penalty of perjury, under t	he laws of the St	tate of California	, that the information submitted						
Applicant Signature	Date Signed								
For Official Use Only **Certificate Number Certificate Number PA -			crtificate Issuance Date Certificate Ex DEC. 31,			piration Date			
Certificate Issued By:		Titl	le	CAC Phone No	ımber				
Passed Recertification Examination Yes	No	Sc	ore%						

^{*} An "Authorized representative" is defined as: a person designated, in writing by the operator of the property, to represent the operator of the property in obtaining a restricted material permit.

^{**} The Certificate Number format is PA - county code - 5 digit number.

State of California

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Failure to complete or provide the requested information may delay the processing of your application.

DPR will only disclose personally identifiable information, such as home phone number and personal email address, to third parties as required by state or federal law or regulation and consistent with the Information Practices Act (Civ. Code, sections 1798-1798.78).

A. Application Type:

- New Applicant (Practical Knowledge Exam): Individuals who are applying for the Private Applicator Certificate for the first time shall take this examination. An applicant for a private applicator examination shall be at least 18 years old and present at the time of examination valid, government-issued photo identification as proof of identity and age. The name included on the submitted application shall match the name stated on the valid government-issued documentation presented.
- Add Burrowing Vertebrate Pest Fumigation Exam: Individuals who use or supervise the use of a pesticide listed in Title 3, California Code of Regulations (3CCR) Section 6400 that are labeled as a fumigant to control burrowing vertebrate pests shall take this examination.
- Renewal: Enter your current Private Applicator Certificate number and attach certificates of completion for each course attended (if applicable). You may choose to recertify by passing the appropriate recertification exam(s). Renewal requests shall be submitted to the county agricultural commissioner no sooner than 120 days prior to, and no later than 90 days after, the expiration date of your certification.
- **B.** Applicant Information: Indicate your relationship to agricultural production operation. Enter the name of the operator or business, a cell or home phone number, and work phone number. Enter your name (name used shall match the presented valid government-issued documentation), E-Mail address, complete mailing address, and indicate you meet the minimum age requirement.
- **C. Continuing Education Information:** Enter the course title, DPR course identification code, date(s) of attendance, and the number of continuing education hours received for each course attended. Attach a copy of your CE completion certificate(s). Keep your original certificate(s) for a minimum of three years from the date of course completion.
- D. Declaration / Signature Block: Sign here to indicate that all of the information submitted is true and correct.

Turn this application into your local county agricultural commissioner's office.

If you have any questions about this application or the Private Applicator Certificate, please contact your local county agricultural commissioner's office.