











Florida Department of Agriculture and Consumer Services

NICOLE "NIKK!" FRIED, Commissioner



EXAM APPLICATION FOR COMMERCIAL PESTICIDE APPLICATOR Section 487.046(1), F.S., and Rule 5E-9.026 F.A.C.							
Applicant must be 18 red asterisk are				apply. Provide the d			
			Examina	ition Purpose			
* O New License O R	tenewal	O Add a	Category	y If exist	s, License#:		
			Applicant	: Information			
First Name: *	Middle	Name:		Last Name: *	Suffix:		
Date of Birth: *	Place	of Emplo	yment: *		Title:		
Florida Resident: *	Email	*		Busin	ess Email:		
O Yes O No							
Either home phone							
Home Phone:	Cell P	none:		Business Phone:	Fax Number:		
			Address	Information			
Home (Physical) Addre	ss: *	Line 2:		Home City: *	State: *	Zip Code: *	
					<select> v</select>		
Mailing:* same as I	Home	Line 2:		Mailing City: *	State: *	Zip Code: *	
					<select> v</select>		
Business Address:*		Line 2:		Business City: *	State: * <select> v</select>	Zip Code: *	
	_				<select> V</select>		
			Clear	Next			

Fill this out, then click Next





Florida Department of Agriculture and Consumer Services

NICOLE "NIKKI" FRIED Commission



	I FOR PUBLIC PESTICIDE APPLICATOR 046(1), F.S., and Rule 5E-9.026 F.A.C.				
	Select Exam(s)				
General Standards (Core)	Organotin Antifouling Paint				
Aerial Application	Ornamental and Turf				
Agricultural Animal	Raw Agricultural Commodity Fumigation				
Agricultural Row Crop	☐ Regulatory Inspection/Sampling				
Agricultural Tree Crop	Regulatory				
Aquatic	☐ Right-Of-Way				
Chlorine Gas Infusion	Seed Treatment				
☐ Demonstration and Research	Sewer Root Control				
☐ Forest Pest Control	Soil/Greenhouse Fumigation				
☐ Natural Areas Weed Management	☐ Wood Treatment				

Check the exams you want to take, then click Review

NOTE: if you don't already have a license, you need to take the General Standards (Core) exam AND a category exam



License#:

Business Email:

Cell Phone:

Fax Number:

Title:

Date of Birth: YOUR DATE OF BIRTH

YOUR LICENSE # (if you already have one)



Florida Department of Agriculture and Consumer Services



NICOLE "NIKKI" FRIED, Commissioner

YOUR EMAIL ADDRESS

YOUR HOME PHONE

EXAM APPLICATION FOR PUBLIC PESTICIDE APPLICATOR Section 487.046(1), F.S., and Rule 5E-9.026 F.A.C.

Review Application EDIT

Examination Purpose: NEW OR ADD A CATEGORY

Applicant Name: YOUR NAME
Employer Name: YOUR EMPLOYER'S NAME

Email: Home Phone:

Business Phone:

Florida Resident: YES or NO

Home Address: YOUR HOME ADDRESS
Mailing Address: YOUR MAILING ADDRESS
YOUR BUSINESS ADDRESS

Requested Exams: The exams you want to take at the Short Course on Thursday

Acknowledgement

I have an our penalty or perjury that all of the information provided in this application and in any exhibits attached hereto, is true and correct.

Submit

Verify your info

Check this box, then click Submit





Florida Department of Agriculture and Consumer Services



NICOLE "NIKKI" FRIED, Commissioner

APPLICATION CONFIRMATION

Florida Department of Agriculture & Consumer Services has received your application. Reference information for your application is provided below.

VOUCHER NUMBER(s): Voucher #1

Voucher #2

reference information required to schedule exam:

Application Date: Application Type: 08/19/2022

Exams Applied:

Public, Private or Commercial Pesticide Applicator Examination Voucher number-exam category

Applicant Name:

Voucher number-exam category
YOUR NAME (AND DATE OF BIRTH)

Home Address: Mailing Address: Business Address:

ddress: YOUR BUSINESS ADDRESS
your PHONE NUMBERS

Phone Number(s): Email(s):

YOUR EMAIL ADDRESS

Email Confirmation

YOUR HOME ADDRESS

Print Confirmation

Write down your voucher number(s) (one for each exam)

Email or print confirmation

IMPORTANT - DIRECTIONS

- You must schedule your exam from: University of Florida IFAS Extension
- · Licensing Information: Pesticide Certification and Licensing
- For questions regarding Licensing/Exams please contact the FDACS AES, Pesticide Certification
- Section at 850-617-7870.

Click to schedule your exam(s)





















