

RETURN TO:
Government of the District of Columbia
Department of the Environment
Toxic Substance Division/Hazardous Materials Branch
Pesticide Program
1200 First Street, N.E., 5th Floor
Washington, D.C. 20002
Ph. (202) 535-2299
Fax.(202) 481-3770

FORM ES-775 (05/10)



PRELIMINARY APPLICATION FOR A PESTICIDE OPERATOR'S LICENSE

TYPE OR PRINT IN INK

(A) _____
Complete Business Name/If Corporation Use Corporate Name

(B) _____
Trade Name of Business Telephone Number

(C) _____
Business Residence Address (P.O. Boxes not accepted)

City State Zip Code

(D) _____
Mailing Address (if different from Item C)

City State Zip Code

(E) **If Applicant (Item A) is a:**
/ / Sole Proprietor / / Corporation / / Government Agency
/ / Other (Specify)

List Partners, Officers, and Title below:

(F) If a Corporation:

State of Incorporation Year of Incorporation

(G) 1. _____
Name of Resident Agent Telephone Number

2. _____
D.C. Residence Address of Agent (No. P.O. Boxes) Street

(H) Are you, or have you ever been licensed to do business as a "Pesticide Operator" in any other locality? / / Yes / / No. IF YES, Provide copy of current License Permit or Registration and Provide details below:

STATE WHEN (DATE)	REGISTRATON, PERMIT OR LICENSE NUMBER	CATEGORIES OF OPERATION
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1. _____

2. _____

(I) Has any licensing agency denied, suspended or revoked your Pesticide Operator registration, permit or license? Yes / / No / / If YES, provide details on a separate sheet.

(J) This business performs (or plans to perform) Pest Control Services in the following categories (CHECK APPROPRIAE BOXES).

CATEGORIES

- | | |
|--|--|
| <p>3. Ornamental and Turf Pest Control:
 A. / / Exterior Ornamental Plants
 B. / / Lawns and Turf
 C. / / Interior Ornamental Plants</p> | <p>8. / / Public Health Pest Control
 9. / / Regulatory Pest Control</p> |
| <p>5. / / Aquatic Pest Control
 (not Including Swimming Pool - see Category 11)</p> | <p>10. / / Demonstration and Research Pest Control</p> |
| <p>6. / / Right of Way Pest Control</p> | <p>11. / / Miscellaneous Pest Control
 (Including Swimming Pools, TBT Users, Aerial Application, Wood Preservation, Cooling Towers, Sewer Line Treatment, Util. Pole Treatment.)</p> |
| <p>7. Industrial, Institutional, Structural and Health Related Pest Control
 A. / / General
 B. / / Wood Destroying Organisms
 C. / / Bird
 D. / / Fumigation
 E. / / Rodent
 F. / / Industrial Weed</p> | |

This is to certify that the above information is true and accurate to the best of my knowledge and that I agree to comply with the provisions of the District of Columbia Pesticide Operations Act. I understand that falsification of any information on this application may lead to denial, suspension or revocation of my certificate or license.

DATE

Signature of: Owner/Partner/Agency Official

Print Name & Title