VIRGINIA DEPARTMENT OF AGRICULTURE AND CONSUMER SERVICES
OFFICE OF PESTICIDE SERVICES
P. O. Box 1163 • Richmond, VA 23218
Phone: (804) 371-0209 • Fax: (804) 786-9149 • www.vdacs.virginia.gov

PRIVATE PESTICIDE APPLICATOR APPLICATION & REQUEST FOR AUTHORIZATION TO TAKE THE PESTICIDE APPLICATOR EXAMINATION

Please check the appropriate box below:

☐ **New Applicator** ☐ **Retesting** ☐ **Reinstatement** ☐ **Recertify** ☐ **Reciprocate***

If Retesting, Reinstating, or Recertifying, please provide your Customer/Certificate Number: _____

All Applicators, including those with certificates issued via reciprocity will have to be reexamined if their Virginia certificate lapses for any reason.

PLEASE TYPE OR PRINT THE FOLLOWING INFORMATION:

Person taking the Virginia Private Pesticide Applicator Exam:

SOCIAL SECURITY NO.: _____ - _____ - _____ (**REQUIRED**) DATE OF BIRTH: _____/_____/_____ Day Month Year

HOME PHONE NO.:_____ (Area Code) BUSINESS PHONE NO.:_____ (Area Code)

NAME OF APPLICANT: _____ (Last) (First) (M.I.)

MAILING ADDRESS: _____ (Street or RFD)

CITY: _____ STATE: _____ ZIP CODE: _____

COUNTY: _____ EMAIL: _____

Regarding the owner of the establishment, **are you an immediate family member***? ☐ Yes or ☐ No

If yes, circle one of the following **immediate family member** terms that describes your relationship with the owner-

1. Parent 2. Grandparent 3. Sibling (brother/sister) 4. Aunt or Uncle 5. First cousin 6. Child 7. Grandchild

***In order to reciprocate from another state, you will need to provide a current copy of your home state certificate.** Your home state is the state in which you took the pesticide exams. Virginia will not issue a certificate based on reciprocity if you did not test in the state that issued the certificate that you submit. In order to maintain a Virginia certificate issued on a reciprocal basis, you must maintain your home state certificate and submit a copy each time it is renewed.

_____ Signature of Applicant

_____ Date

Please mail the completed form to the address above or fax to 804-786-9149. Wait to receive authorization before reporting to the DMV. If you have any questions, please contact Joan Hammond by phone at 804-371-0209 or email at joan.hammond@vdacs.virginia.gov.

Certificate Number :
Date Keyed:
Keyed by: