

	Office Use Only
Issued: _	

Cashier Use Only

PO Box 42591 Olympia WA 98504-2591

Toll Free: 877-301-4555 | license@agr.wa.gov

2026 Commercial Applicator Renewal Application

Renew online: https://fortress.wa.gov/agr/apps/PMLicRenewal/ Print any necessary license information changes on the application. Change of Applicator Check all application methods that apply **UBI Number** ☐ Air ☐ Ground ☐ Chemigation ☐ Fertigation | | Yes Applicator First Name Middle Name Last Name Birth Date **Phone Number** License Number **Applicator Home Mailing Address** City State Zip Code Company Name (List DBAs on reverse side) Company Email Address Company Phone Number **Company Mailing Address** City Zip Code State Street Address — Physical Site Where Business Operates (Required) State Zip Code **Business Structure** One of the following must apply in order for you to qualify for a Commercial Applicator license. Please check the applicable statement: 1: I am the sole owner and manager of the pest control business. 2: I am a part-owner of the pest control business and manage its pesticide application activities. 3: I have no ownership interest in the business but manage its pesticide application activities without the owner(s) participation. (Affidavit of Management Responsibility on reverse side must be completed and notarized.) 4: The business is a corporation. President Private Applicator/Structural Pest Inspector Renewal Yes, I would like to renew my Private Applicator license. Yes, I would like to renew my Structural Pest Inspector license. **Renewal Fee Information and Signature Instructions:** Complete the "Fee Information" section below. If submitting this application after January 1, you must pay the penalty fee or sign the "Penalty Fee Exemption Statement" stating that you have not operated as a Commercial Applicator since the expiration of your last license. Payment of the penalty fee shall not exempt you from any enforcement action by WSDA for any violation of RCW 15.58 or RCW 17.21. After completing the fee information (and penalty exemption, if required), sign and date the application. Fee Information Penalty Fee Exemption Statement (See instructions above) License Fee: \$250.00 (includes **one** spray apparatus) I have not operated as a Commercial Applicator since the expiration of my last license. Signature of Applicant: _____ Date: _____ Additional Equipment $($27.00 \text{ each}) ___ x $27 = $____$ <u>Applicant Signature</u> Add \$25 Penalty Fee after January 1 I verify that the information provided on this application is true and to the best of my (unless exemption statement signed):\$_ knowledge. Total Remittance: Signature of Applicant: ______ Date: _____ Make check payable to WSDA*

^{*}Checks returned by the bank will be charged a handling fee of \$25.00 (RCW 62A.3-515 (a) and 62A.3-520)

Number and Size of Tanks Office Use Only Acrial Equipment FAA Ag. Certificate Number:	Ground / Chemigation Apparatus								
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