

APPLICATION FOR A RESTRICTED USE PESTICIDE DEALER'S LICENSE
UNDER THE PESTICIDE USE AND APPLICATION ACT AND ARKANSAS REGULATIONS
ON PESTICIDE CLASSIFICATION

INSTRUCTIONS: Complete the sections below and submit, along with the **\$65.00** license fee, to the Arkansas State Plant Board P. O. BOX 1069, Little Rock, Arkansas 72203. Use a separate application for each location.

Out-of-state persons or firms - Attach Power of Attorney (forms enclosed) designating an Arkansas resident or the Secretary of State for service of process.

DEALER'S LICENSE: For dealers selling, offering for sale or distributing restricted use pesticides (including products designated Class E or F, in containers of more than ONE [1] quart). A SEPARATE LICENSE IS REQUIRED FOR EACH LOCATION.

I hereby certify that I will observe the Regulations on Restricted Use Pesticides and Pesticide Classification. In particular I agree to sell or distribute Restricted Use Pesticides only to licensed custom, commercial, non-commercial, and private applicators or to other licensed Dealers. I will maintain a record of each sale or distribution for two (2) years, and permit inspection by the Plant Boards representatives upon request.

Amount Enclosed \$ _____ Signature _____

<p>DO NOT WRITE IN THIS SPACE</p> <p>License approved for the calendar year 20 _____</p> <p>_____</p> <p>Pesticide Division</p> <p>Date _____</p>

Firm Name _____

Mailing Address _____

Physical Address _____

City and State _____ Zip Code _____

Signed By _____
(Please Print)

Title _____

Date _____

Telephone Number _____

Fax Number _____

E-mail Address _____