

**NORTH CAROLINA DEPARTMENT OF
AGRICULTURE & CONSUMER SERVICES**
STRUCTURAL PEST CONTROL & PESTICIDES
DIVISION
1090 MAIL SERVICE CENTER
RALEIGH, NC 27699-1090
Phone 919 733-6100 ▪ Facsimile 919 733-0633

EXAMINATION PREREGISTRATION FORM

APPLICANT INFORMATION

| | | | |
|-------------------|-------|----------------------|----------------|
| Applicant's Name: | | Tel. No.: | Email Address: |
| Home Address: | | Social Security No.: | |
| City | State | Zip Code | County |

APPLICANT HISTORY

| | | | |
|-----------------------------------------------------------------------------------|------------------------------|-----------------------------|----------|
| Are you currently Licensed in North Carolina? | Yes <input type="checkbox"/> | No <input type="checkbox"/> | Lic. No. |
| Are you currently Certified in North Carolina? | Yes <input type="checkbox"/> | No <input type="checkbox"/> | CA. No. |
| Have you failed any of the above examinations within the past twelve (12) months: | Yes <input type="checkbox"/> | No <input type="checkbox"/> | |
| If yes, date last examination taken (if known): _____ | | | |

COMPANY INFORMATION

| | | | |
|----------------|----------|----------|--------|
| BUSINESS NAME: | Tel. No. | | |
| ADDRESS | | | |
| City | State | Zip Code | County |

EXAMINATION INFORMATION

| TYPE OF EXAM: | EXAM PHASE |
|------------------------------------------|-------------------------------------|
| <input type="checkbox"/> License | <input type="checkbox"/> Core |
| <input type="checkbox"/> Certification | <input type="checkbox"/> Pest |
| <input type="checkbox"/> Recertification | <input type="checkbox"/> Wood |
| | <input type="checkbox"/> Fumigation |
| DATE APPLYING TO TAKE EXAMINATION: | |
| LOCATION OF EXAMINATION: | |

| | |
|-----------------------|------|
| Applicant's Signature | Date |
|-----------------------|------|

INSTRUCTIONS

You MUST PREREGISTER by:

Completing an EXAMINATION PREREGISTRATION FORM and mailing it to the Structural Pest Control & Pesticides Division (NCDA & CS, Structural Pest Control & Pesticides Division, 1090 Mail Service Center, Raleigh, NC 27699-1090). The form must be received ten (10) days prior to the exam. Late forms will be returned. No fees will be due or accepted with your Form.

If you are preregistering to take the certification exam, you must first have attended the Registered Technician School or approved equivalent training. If approved equivalent training applies to you, you must submit proof of such training with your preregistration form.

If you are preregistering to take the license exam, you must be approved for any phase of structural pest control work by the Committee in advance of preregistering to take the exam.

NOTIFICATION OF PREREGISTRATION:

An Exam Admission Card* will be mailed to approved applicants approximately one week prior to the exam date. This card will indicate the exam site; date and time of exam; types of exams to be taken; and fees owed. If you fail to present this Admission Card to the examiner at the exam site, you will not be permitted to take the exam.

*There will be no Exam Admission Cards mailed out for the exam given at the Annual NCPMA PCT School.

All fees will be collected by the Structural Pest Control Section personnel at the exam site. **ONLY CHECKS OR MONEY ORDERS PAYABLE TO NCDA WILL BE ACCEPTED.** No receipts will be given.

FEES FOR EXAMINATIONS:

LICENSE

\$50.00 per phase

CERTIFICATION & RECERTIFICATION

\$25.00 per phase
NO CHARGE for the Core Examination