

NORTH CAROLINA DEPARTMENT OF AGRICULTURE AND CONSUMER SERVICES
FORM #7 **STEVE TROXLER, COMMISSIONER**
APPLICATION FOR LICENSE/CERTIFICATE (NEW)

029	Type: 029 Aerial Applicator (Apprentice) <u>TO BE ADDED</u>	
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<p>◆ Since you have passed your pesticide exam, you are eligible to be licensed ◆</p> <p>Instructions:</p> <ul style="list-style-type: none"> ● The information that you provide will be used to prepare your certification card. ● Provide your name, address, phone, county, & social security number. ● Sign on the line at the bottom of the page. ● Application should be returned with a check or money order in the amount of \$75.00 made payable to NCDA&CS. PLEASE DO NOT SEND CASH. 	<p>Please return this application with fee to:</p> <p>NCDA&CS Structural Pest Control & Pesticides Division Licensing Unit 1090 Mail Service Center Raleigh, NC 27699-1090 Phone: (919) 733-3556</p>
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Name:			
Company Name:			
Address:			
Address:			
City:		State:	
Phone (Home):		Phone (Work):	
County:		Social Security Number:	
E-mail:			

Tested Online Tested in Person

SIGNATURE REQUIRED

X

 APPLICANT'S SIGNATURE

No application is accepted unless signed by the applicant and accompanied by full payment.

FEE: \$75.00

Check or money order made payable to NCDA&CS.

For training opportunities, contact your local Cooperative Extension or visit our website: www.ncagr.gov/SPCAP/pesticides

DO NOT email form.

You **MUST** mail in the form with a check or money order.

NORTH CAROLINA DEPARTMENT OF AGRICULTURE
Structural Pest Control and Pesticides Division
1090 Mail Service Center, Raleigh, NC 27699-1090

APPLICATION FOR AERIAL PESTICIDE APPLICATOR'S LICENSE (PILOT / APPRENTICE)

PLEASE PRINT

A. Applicant's Name _____ Birth Date ____/____/____
Last First Initial

Mailing Address _____
Street City State Zip Code County

Contractor's Name _____ Contractor's License # **028**- _____

Contractor's Business Address _____
Street City State Zip Code County

Applicant Phone # (____) _____ Contractor Phone # (____) _____

B. FAA Pilot Certificate: Number _____ Type: Traditional Aircraft UAV Date Issued; ____/____/____

Number of hours and years of flying experience applying pesticides as a pilot: _____ hours: _____ year(s). (A pilot lacking 125 hours and one year's flying experience as a pilot in the field of aerial pesticide application may be licensed as an Apprentice Aerial Pesticide Pilot provided that all aerial applications of pesticides are conducted under the direct supervision of a licensed Aerial Pesticide Applicator Pilot. The supervising pilot, while directly supervising an apprentice, shall operate out of the same airstrip as the apprentice and shall be available periodically throughout the day to provide advice and assistance to the apprentice.) If applying for Apprentice Aerial Pesticide Applicator Pilot License, give name and address of licensed Aerial Pesticide Applicator Pilot under whose direction and supervision you will be working.

C. If you have been licensed as an Apprentice Aerial Pesticide Applicator Pilot and you are now applying for a regular Aerial Pesticide Applicator Pilot license, submit the following:

1. Name and address of licensed Aerial Pesticide Applicator Pilot who supervised your apprenticeship:

2. Number of hours under his supervision:

D. If you fly your own aircraft while working for contractor, fill in the following:

Make: _____ FAA Registration No. _____

The annual fee for a Pesticide Applicator License (Pilot) is \$75.00. In addition, an annual inspection fee of \$25.00 is required for each plane operated in North Carolina.

Signature _____ Date: _____

Social Security Number _____ Driver's License Number & State _____

NCDA&CS Use Only:

Exam Score(s):