

# INSTRUCTIONS FOR COMPLETING THE LICENSE APPLICATION

## **APPLICANT INFORMATION**

Complete all personal information for the applicant. Be sure to include the *Job Title*.

## **COMPANY INFORMATION**

The company's name and address with which you are currently employed. **\*\* *The physical address must be a legitimate, home office location, where pest control activities are originated from. It cannot be a post office mailbox, storage facility, or any other nondescript location.***

## **LICENSE INFORMATION**

Check the appropriate box: New License, New Phase added to existing license, Transfer of License from one employer to another, or Replacement of lost license.

Check the box for the phase(s) to be included or added to the license.

## **EMPLOYEE INFORMATION**

Indicate the number of employees who will perform structural pest control under your license. Do not include yourself or clerical staff.

## **RESIDENT AGENT INFORMATION**

This section applies only to licensees that resides outside of North Carolina. The resident agent should be located at the home office location of the licensee in North Carolina.

## **FEES SUBMITTED**

Fees required are listed on the front of the form. Be sure to indicate the amount paid and to include your check or other form of payment with the application. Applications received without payment will be returned. Mail applications with fees to:

NC Department of Agriculture  
Structural Pest Control & Pesticide Division  
1090 Mail Service Center  
Raleigh, NC 27699-1090

## **INSURANCE INFORMATION**

All active licenses must provide proof of insurance before a Structural Pest Control License is issued; licenses issued in the inactive status **do not** require proof of insurance. Insurance COIs must be sent directly by the insurance company to: **Insurance@ncagr.gov**

## **APPLICANT AND RESIDENT AGENT CERTIFICATION**

All applicable individuals must sign the application. Unsigned applications will be returned.

**NORTH CAROLINA DEPARTMENT OF AGRICULTURE & CONSUMER SERVICES  
STRUCTURAL PEST CONTROL DIVISION, 1090 Mail Service Center, Raleigh, NC 27699  
APPLICATION FOR STRUCTURAL PEST CONTROL LICENSE**

(Type or Print in Ink)

<b>APPLICANT INFORMATION</b>										
Applicant's Name:				Cell Phone Number:			Social Security Number:			
Home Address:						Job Title:				
City		State	Zip	E-Mail Address						
<b>COMPANY INFORMATION</b>										
Company Name:						Direct Telephone Number: (not call center)				
Physical Address <small>** (see instructions)</small>					Mailing address (if different from physical address)					
City		State	Zip	County		City		State	Zip	County
<b>LICENSE INFORMATION</b>										
This application is for: (Check the applicable box. <b>For transfers, indicate the last day of employment with previous employer</b> ):			New License			Address Change (Effective date): _____				
			Add License Phase			Transfer License to New Employer (Effective date): _____				
			Recertify Expired License Card			Replacement License (Current license #): _____				
Check license phase(s) and card status for which application is being made (see instructions on back):				P (Household Pest) _____ Test Date				Select:  Active  Inactive		
				W (Wood-Destroying Organism) _____ Test Date						
				F (Fumigation) _____ Test Date						
<b>EMPLOYEE INFORMATION</b>										
Indicate the number of employees who will perform structural pest control under this license, not including you or clerical staff										
<b>RESIDENT AGENT INFORMATION</b>										
If you are not a resident of North Carolina you must designate a resident agent that resides within NC. The resident agent's address must be the same as the company address.										
Resident Agent's Name:						Direct Telephone Number:				
Address:										
City			State	Zip		County				
<b>FEES SUBMITTED</b>										
Fees for a <b>new</b> license are:		Fee to add a new phase is:		Fee for a license transfer or replacement :		Enter total fee enclosed:				
One Phase: \$200.00		\$75.00 per phase		\$10.00						
Two Phases: \$275.00										
Three Phases: \$350.00										
<b>INSURANCE INFORMATION</b>										
A license cannot be issued without proof of insurance. Proof of insurance as required by NC GS 106-65-37 and 02 NCAC 34.0902 must include a pollution and contamination endorsement clause. Insurance certificates are accepted from the insurance company only.										
<b>APPLICANT AND RESIDENT AGENT CERTIFICATION</b>										
<b>I hereby certify that the information given in this application is true and correct.</b>										
Signature of License Applicant:						Date:				
Signature of Resident Agent (required if applicable):						Date:				