

**MONTANA DEPARTMENT OF AGRICULTURE**  
**PESTICIDE LICENSE APPLICATION**  
**APPLICATORS / OPERATORS / DEALERS / FIELD SALES PEOPLE**  
 FOR ANNUAL LICENSING YEAR ENDING DECEMBER 31

**APPLICANT NAME AND MAILING ADDRESS:** Pesticide License Number \_\_\_\_\_

First Name	MI	Last Name	Phone Number		
Mailing Address		City	County	State	Zip

**APPLICANT BUSINESS NAME AND ADDRESS:**

Business Name	Phone Number				
Street Address		City	County	State	Zip

**LICENSE TYPE (check only one):**

Dealer     Commercial     Non-Commercial     Public Utility     Governmental

**SPECIFIC APPLICATOR CLASSIFICATIONS (check each desired – must be certified):**

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> (21) Aerial**                        | <input type="checkbox"/> (31) Ag Animal Pest Control           | <input type="checkbox"/> (32) Ag Vertebrate Pest Control |
| <input type="checkbox"/> (30) Agricultural Plant Pest Control | <input type="checkbox"/> (34) Ornamental & Turf Pest Control   | <input type="checkbox"/> (35) Seed Treatment             |
| <input type="checkbox"/> (33) Forest Pest Control             | <input type="checkbox"/> (37) Right of Way Pest Control        | <input type="checkbox"/> (38) Public Health Pest Control |
| <input type="checkbox"/> (36) Aquatic Pest Control            | <input type="checkbox"/> (40) Ind Inst Struct & Health Related | <input type="checkbox"/> (41) Wood Treatment             |
| <input type="checkbox"/> (39) Demo & Research Pest Control    | <input type="checkbox"/> (43) Sodium Cyanide (M-44)            | <input type="checkbox"/> (44) Special Utility            |
| <input type="checkbox"/> (42) Livestock Protection Collar     | <input type="checkbox"/> (46) Piscicide                        | <input type="checkbox"/> (56) Other                      |
| <input type="checkbox"/> (45) School IPM                      |  |  |

**REGULATORY CLASSIFICATIONS (GOVERNMENT ONLY):**

(50) Mosquito Abatement     (51) Predator     (54) Rodent     (55) Weed     (46) Piscicide

**LIST OPERATORS OR SALES PEOPLE WORKING UNDER THE APPLICANT NAMED ABOVE**

Do not include the applicant named above. Please print the full name of each person. Operators are licensed in the same classifications as applicant except #43 Sodium Cyanide (M-44). Training requirement noted below.\*

- |          |           |
|----------|-----------|
| 1. _____ | 6. _____  |
| 2. _____ | 7. _____  |
| 3. _____ | 8. _____  |
| 4. _____ | 9. _____  |
| 5. _____ | 10. _____ |

**I hereby certify** that the information on this application is true and correct and agree to comply with all provisions of the Montana Pesticides Act, Title 80, Chapter 8, Parts 1, 2, 3 and 4 and rules adopted thereunder.

\* I further certify that the **operators listed above** have been trained according to subchapter 2, Section 4.10.206 of the rules adopted under the Montana Pesticides Act, Title 80 Chapter 8, Section 80-8-101 through 80-8-306, M.C.A.

\*\* Individuals applying for a license **for aerial application of pesticides** are certifying that they meet all Federal Aviation Administration requirements for aerial applicators.

**Date:** \_\_\_\_\_

**Signature:** \_\_\_\_\_

## ANNUAL LICENSING FEES

### 1. Pesticide Applicator and Dealer License Fees:

#### 1A. Non-governmental type Applicator and Dealer licenses

New and renewed licenses = \$55 each

#### 1B. Governmental type Applicator and Dealer licenses\*

First 4 licenses, new or renewed, per agency = \$60 each

Additional licenses, new or renewed, per agency = \$15 each

Agencies are not required to pay more than \$600 each in licensing fees per year

\*Applicants licensing for Federal or Tribal agencies are exempt from all licensing fees

### 2. Operator Fees (Does not apply to a Dealer license):

First 2 Operators added each year = \$25 each, per license

Additional Operators added each year = \$10 each, per license

Note: Field Sales People = no cost

### 3. Renewal Late Fees:

Renewals postmarked **after March 1<sup>st</sup>** add **\$25** to the cost of each license being renewed  
(Late fees do not apply to new licenses)

#### Fees must be paid in full, total all fees 1, 2, 3

1	Pesticide Applicator License fees and Dealer License fees	\$
2	Operator Fees	\$
3	Renewal Late Fees	\$
	Total	\$

Select payment method

### OTHER REQUIREMENTS THAT MUST BE MET WHEN APPLYING FOR A LICENSE:

- > Certified in each license classification checked (CE's or Examination or Reciprocity)
- > Commercial applicators must have valid up-to-date Insurance, CD, or Bond on file
- > Non-residents must include a copy of your pesticide license from your state of residence
- > Application completed, and signed by applicant
- > Application fees paid in full

### CONTACT INFORMATION:

E-mail: [ftglo\\_gt4@mt.gov](mailto:ftglo_gt4@mt.gov) Phone: (406) 444-4900 Fax: (406) 444-9493 Website: [pesticides.mt.gov](http://pesticides.mt.gov)

### MAIL APPLICATIONS TO:

MONTANA DEPARTMENT OF AGRICULTURE  
AGRICULTURAL SCIENCES DIVISION  
PO BOX 200201  
HELENA MT 59620-0201