This document becomes public record and is subject to disclosure. With few exceptions, you have the right to request and be informed about the information that the State of Texas collects about you. You are entitled to receive and review the information upon request. You also have the right to ask the state agency to correct any information that is determined to be incorrect. 

(Reference: Government Code, Sections 552.021, 552.023, and 559.004.)

Licensing Department
Administrative Services Division
Occupational
Applicant Name _________________________

### SECTION C
1. **FACILITY (PRINCIPAL LOCATION OF LICENSEE, LICENSED ACTIVITIES)**
   Facility Name (Person or Business Name)

2. **PHYSICAL ADDRESS OF FACILITY**
   Address (No P.O. Box)
   City  State  Zip  County
   Directions to Physical Location

### SECTION D
1. **COMMERCIAL APPLICATOR BUSINESS INFORMATION**
   Same as Facility
   Registered Commercial Applicator Business account number ______________
   Full Legal Name of Business (Headquarters)  Phone (      ) - Ext.
   If account number is blank the employer or the applicator must complete PAB-300 to accompany this application

### SECTION E
1. Commercial Applicators Only
   Have you been convicted of any felony in the last five years that you have not previously reported to TDA when applying for or renewing a pesticide applicator license?  Yes  No
   If the answer is yes, please provide your date of birth   /   / month day year
   Also attach a statement providing full and complete information regarding the felony crime for which you received a conviction, including the date of the conviction, the state and county where convicted, the sentence and terms of probation, if any, and a brief explanation of the circumstances of the crime and completion of any sentence or probation. State whether you are on parole and whether you are a registered sex offender.

### SECTION F
1. **OUT-OF-STATE APPLICANTS ONLY**
   An applicant for a Pesticide Applicator license whose principal place of business is situated outside the State of Texas must appoint and designate a resident citizen of Texas as said applicant’s resident agent within Texas.
   Who do you wish to designate as resident agent?  The Texas Secretary of State  Other (list below)
   Resident Agent Name
   Resident Agent Address  City  State  Zip  Business Phone (      ) -

### SECTION G
1. **PAYMENT: $200 (FEE NOT REFUNDABLE)**
   License is not valid until approved by TDA.
   Mail to: Texas Department of Agriculture
   P.O. Box 12076, Austin, TX 78711-2076
   TDA USE ONLY  Receipt No.  Date Receipt Issued

Licensing Department
Administrative Services Division
Occupational

Revised 1/1/16
SECTION H

1 SIGNATURE

The applicant, by and through their personal or agent's signature below (1) certifies that all information provided in or in connection with this application is true and correct; (2) acknowledges that any misrepresentation or false statement made by the applicant, or an authorized agent of the applicant, in or in connection with this application, whether intentional or not, will constitute grounds for denial, revocation, or non-renewal of any license issued pursuant to this application and/or assessment of monetary administrative penalties; and (3) if applying as an individual, further acknowledges that this application may be denied and that any license issued pursuant to this application may be suspended, revoked, or denied renewal due to delinquency in payment of a guaranteed student loan and that any license issued pursuant to this application may be suspended or denied renewal for failure to pay child support. If signed by an agent (including employee) of the applicant, the person signing certifies that he or she is authorized to make the preceding certifications on behalf of the applicant.

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<th>Applicant Name (print)</th>
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<th>Applicant Signature</th>
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 SECTION I

1 CHECKLIST

Please use this checklist to ensure you are sending all of the necessary information and documents.

☐ Pesticide Applicator Application
☐ Fee (see instructions for assistance with calculating the correct fee.)
☐ PAB-300 Pesticide Application (if applicable)

Please note that an incomplete application may result in denial or delay in processing the application.

† A social security number is mandatory and required by Texas Family Code § 231.302 for this occupational license. Social security numbers are required to assist in child support enforcement. In the event the applicant does not have a social security number, attach Form OGC-001, affidavit of no social security number, and provide a driver license number or state-issued ID number. Form OGC-001 is available on our website at www.TexasAgriculture.gov or upon request by U.S. mail. Failure to provide a social security number or an affidavit of no social security number will result in rejection of your application and a license will not be issued to you.

* Pursuant to Section 55.005 of the Texas Occupations Code.