INSTRUCTIONS FOR
PESTICIDE APPLICATOR CHANGE OF INFORMATION
FORM NO. PA-406

Complete only the sections where information has changed and return to TDA. The Texas Administrative Code requires you to provide TDA with current information. Changes should be submitted to TDA within 30 days. Failure to provide such information may be grounds for denial, suspension or revocation of the license.

For assistance in completing the form, call 1-800-TELL-TDA (835-5832) or directly (512) 463-7622. For the hearing impaired, call Relay Texas 1-800-735-2988 (voice) or 1-800-735-2989 (TDD/TT).

SECTION A

1. VERIFICATION INFORMATION
Enter your Full Legal Business Name, TDA Client Number, and TDA License Number.

SECTION B

1. NEW PHYSICAL ADDRESS
Enter the actual physical street address of the licensee, licensed activities or the equipment, including directions to this location if the address is difficult to locate. Please do not enter a P.O. Box. This information will assist TDA inspectors in locating your business in the event that an inspection is needed.

2. NEW MAILING ADDRESS
Enter the address at which the applicant receives general correspondence, where applicable.

3. CONTACT INFORMATION
All correspondence, licenses, and other documents will be sent to the Person to Contact at the email address listed. Approximately 30 – 45 days in advance of the expiration date of the license/certificate, the contact employee will receive a renewal invoice via email that will include a login ID and password to access TDA’s internet website. The contact employee will then be able to conduct business related to their assigned license(s) online, including viewing their licenses, making changes to their company information, and renewing their licenses. A business can appoint one contact person to manage online all of the company's licenses.

SECTION C

1. EMPLOYER’S INFORMATION
Provide the name and phone number of your employer. If you own the business, please indicate that. Pesticide applicator businesses should also fill out an “Applicator Business Registration” form to provide TDA with insurance and equipment information. That form is available on the web site (www.agr.state.tx.us) or by calling TDA at the numbers above.

2. EMPLOYER’S PHYSICAL ADDRESS
Provide the physical location of your employer’s business.
3. EMPLOYER’S MAILING ADDRESS
Provide your employer’s mailing address.

SECTION D

1. NEW RESIDENT AGENT - OUT-OF-STATE APPLICATORS ONLY
An applicant for a pesticide applicator license whose principle place of business is situated outside of Texas must appoint
and designate a resident citizen of Texas as said applicant’s resident agent within Texas. An applicant may appoint the
Texas Secretary of State by checking the appropriate box. If the applicant wants to appoint an individual, provide the
name and contact information requested.

SECTION E

1. SIGNATURE
After reading the summary, print and sign your name, and date the form. Your signature here indicates that you have read
the summary and that you are aware of your responsibilities regarding the issuance of the requested license.