INSTRUCTIONS FOR
SERVICE COMPANY APPLICATION
FORM NO. RWM-705

In order to obtain a Service Company License, you must submit a complete signed application along with the appropriate fees. The license will be issued to the name appearing under Section B of this application. The business must also maintain liability insurance. A copy of a certificate of calibration for test standards certified by an approved laboratory must be on file with the Department.

SECTION A

1. TYPE OF APPLICATION
Check the box that identifies the application type. A new business application is for a business that has not held a TDA license. A change of ownership application is for a business acquired from a previously licensed owner or an established business which has changed its business structure or ownership (see "Business Type" below). Provide the most recent license account number if known.

2. BUSINESS TYPE
Check the box that identifies your type of business. Once submitted, this information cannot be changed. Any change in business type requires a new application.

3. CLIENT INFORMATION
This information will be used to generate your license. Enter the full legal name of your business as it is registered with the Texas Secretary of State. If applicable, also enter an assumed name. For Texas businesses, except sole proprietors, provide a Comptroller Taxpayer ID. For out of state businesses and non-profit organizations, provide a Federal Tax ID.

For sole proprietors applying for this license, a social security number is 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 through 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.

SECTION B

1. RESPONSIBLE PERSON INSTRUCTIONS (see form)

2. RESPONSIBLE OFFICER, PARTNER, MANAGER, OR OWNER
Enter the name and contact information for the person responsible for the business.

3. RESPONSIBLE PERSON MAILING ADDRESS
Enter the mailing address for the responsible person. Provide an internet address for the business if applicable.

NOTE: TDA prefers that the Person to Contact named by the business in Section C sign this application. The Person to Contact may be the same as the Responsible Person.

SECTION C

1. PERSON TO CONTACT FOR LICENSE-RELATED MATTERS

Enter the name and contact information for a person designated to discuss and answer questions about license-related issues.

All correspondence, licenses, and other documents will be sent to the Person to Contact at the email address listed in the application. Approximately 30 – 45 days in advance of the expiration date of the license or certificate, the Person to Contact will receive a renewal invoice via email that will include a login ID and password to access TDA's internet website. The Person to Contact 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.

2. MAILING ADDRESS

Enter the mailing address for the Person to Contact.

SECTION D

1. FACILITY INFORMATION

Enter facility name.

2. PHYSICAL ADDRESS OF FACILITY

Enter the actual physical street address of the licensee, licensed activities, or licensed equipment, including directions to this location. Please do not enter a P.O. Box. This information will facilitate inspection of your business by TDA inspectors.

SECTION E

1. OUT-OF-STATE APPLICANTS ONLY

Check either the Texas Secretary of State or the “Other” box and enter the resident agent’s contact information. Only fill out the Resident Agent contact information if the Texas Secretary of State box is not checked. If the address provided in section A is out of state, agent information is required before a license can be issued

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SECTION F

1. EQUIPMENT TO BE SERVICED

Please indicate which class(es) of equipment your company will service. A fee applies to each class as indicated.

SECTION G

1. INSURANCE INFORMATION

Please list the name of your insurance company and local insurance agency. Provide the name, address, business phone, and fax number of your local insurance agent.

2. POLICY INFORMATION

Please list the number, effective date, expiration date and limits of your insurance policy. Submit copy of a Certificate of Insurance.

SECTION H

NOTE: The Texas Department of Agriculture only accepts checks, cashier's checks, or money orders.

Fee is $150 per Class.

1. PAYMENT

Check method of payment. Enter check number or money order number. Enter amount remitted.

Please remit to: The Texas Department of Agriculture, P.O. Box 12076, Austin, TX. 78711-2076.

SECTION I

1. SIGNATURE

After reading the summary, print, sign, and date the application. Your signature acknowledges that you have read the summary and that you are aware of your responsibilities regarding your license.

SECTION J

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

1. CHECKLIST

Check all boxes to verify you have completed the application process and attached or enclosed all items requested in the application such as payment, security seal, copy of certificate of insurance, and calibration date.