

# License/Business Registration

Santa Cruz County Agricultural Department

(↓ check one ↓)

- Pest Control Business / PCB
- Pest Control Advisor / PCA
- Landscape Maintenance Gardener / LMG
- Farm Labor Contractor / FLC
- Structural Pest Control Business / SPCB
  - Branch 1
  - Branch 2
  - Branch 3
- Pilot Journeyman
- Pilot Apprentice

Registration Year \_\_\_\_\_

photocopy  
valid  
professional license / certificate  
here

Fee \$ \_\_\_\_\_ Cash    Check    N/A    (← circle one, make checks payable to “Santa Cruz County Ag”)

Name \_\_\_\_\_ / Qualifying Mgr.    Branch Super.    (← circle one if SPCB)  
(print name)

Professional license # \_\_\_\_\_ (e.g., QAL, PCA, OPR, FR)

Business name \_\_\_\_\_ R/M Permit # (if applicable) \_\_\_\_\_  
(print name)

Business license # \_\_\_\_\_ / Registration # \_\_\_\_\_ (only for SPCB)

Address \_\_\_\_\_ / Principle Office    Branch Office    (← circle one if SPCB)  
\_\_\_\_\_

Telephone (    ) \_\_\_\_\_ - \_\_\_\_\_    Emergency (    ) \_\_\_\_\_ - \_\_\_\_\_

Cell phone (    ) \_\_\_\_\_ - \_\_\_\_\_    Fax (    ) \_\_\_\_\_ - \_\_\_\_\_

E-mail address \_\_\_\_\_

Licensee signature \_\_\_\_\_ date \_\_\_\_\_

I certify that the information provided is TRUE and CORRECT

Ag Dept. signature \_\_\_\_\_ date \_\_\_\_\_