

**AGRICULTURAL PEST CONTROL ADVISER COUNTY REGISTRATION**

PR-PML-091 (REV. 3/02)

STATE OF CALIFORNIA

DEPARTMENT OF PESTICIDE REGULATION  
PEST MANAGEMENT AND LICENSING BRANCH

	REGISTRATION EXPIRATION DATE DECEMBER 31, _____ (Year)		
	FOR REGISTRATION IN COUNTY OF PLUMAS SIERRA		
	ADVISER'S EMPLOYER		
	ADDRESS		
REGISTRATION FEE RECEIVED \$ _____  IMPRINTING COUNTY'S OFFICIAL SEAL	CITY	ZIP CODE	TELEPHONE NUMBER
	ADVISERS SIGNATURE		DATE
	WRITTEN RECOMMENDATIONS ARE AVAILABLE (CITY & STREET)		
	AGRICULTURAL COMMISSIONER'S SIGNATURE		DATE

Card Copy here	OTHER INFORMATION NEEDED		
	<p>Licensee Information: Emergency Contact Phone No.:</p> <p>Employer: Street Address City Zip Code Telephone</p> <p>Valid Medical Certificate?      Yes      No (for pilots only)</p>		