



# Arizona Department of Agriculture

1688 W. Adams Street, Phoenix, Arizona 85007  
(602) 542-3578 FAX (602) 542-0466  
<https://agriculture.az.gov>

## Request for Reciprocal Applicator Certification

Applicants who are certified applicators in another state or jurisdiction may request reciprocal certification in Arizona by reviewing the information below and completing the requirements therein.

1. Complete and submit the enclosed Reciprocal Certification Eligibility Verification form. Please provide the document to your issuing state for completion. They may return the form to us directly via email, mail, or fax; or returned it to you.
2. Complete and submit the enclosed Request for Reciprocal License Application along with the applicable application fee (\$50.00 for Private or Commercial Applicator Certification or \$100.00 for Golf Applicator Certification).
3. Submit a front and back photo-copy the applicator certificate/license you hold from the state indicated on the Reciprocal Certification Eligibility Verification form. This must be a current and valid certificate/license at the time the application is submitted.
4. Complete and submit a Statement of Lawful Presence to receive Public Benefits form along with a front and back copy or your “evidence of lawful presence” as defined in form.
5. Pay your Arizona certification fee.

Be prepared to submit a letter of authorization to the state that issued your certification, granting authority to the Arizona Department of Agriculture access to your complaint or violation history.

**Attention Aerial Applicators:** Your aircraft must be registered and licensed in the state of Arizona.

If you have further questions you may contact the following Department via email at [licensing@azda.gov](mailto:licensing@azda.gov) or via telephone at 602-542-3578.

Arizona Department of Agriculture  
 Environmental Services Division  
 1688 W. Adams, Phoenix, AZ 85007  
 Phone: 602-542-3578 Fax: 602-542-0466

FOR ADA USE ONLY	
License No:	_____
Postmark Date:	_____
Check No.:	_____
Check Amount:	_____
Line Number:	_____

**REQUEST FOR RECIPROCAL LICENSE**  
 CERTIFIED APPLICATOR – Restricted Use Certification

**Commercial or Private Applicator  = \$50.00    Golf Applicator  = \$100.00**

Applicant Name\*: \_\_\_\_\_ Government Employee: Yes \_\_\_ No \_\_\_

Social Security Number\*: \_\_\_\_\_ E-Mail Address \_\_\_\_\_

Mailing Address\*: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_ Zip \_\_\_\_\_

Daytime Phone\*: \_\_\_\_\_ Cell: \_\_\_\_\_ Fax : \_\_\_\_\_

Arizona Employer Name\*: \_\_\_\_\_ E-Mail Address: \_\_\_\_\_

Mailing Address\*: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_ Zip \_\_\_\_\_

Daytime Phone \*: \_\_\_\_\_ Employer Fax \_\_\_\_\_

What state is your resident pesticide certification in\*: \_\_\_\_\_ When does this license expire\*: \_\_\_\_\_

Have you ever had a similar certification revoked, suspended, or denied in this or any other jurisdiction during the last three years? If YES, please explain: \_\_\_\_\_

All items identified with an (\*) must be completed. Applications that do not contain the required information will not be processed.

Indicate categories you are requesting to be licensed in:	
Test Category	Mark with X
Commercial, Golf, or Private – National Core	
Commercial - Agriculture Pest Control	
Commercial - Forest Pest Control	
Commercial - Seed Treatment	
Commercial, Golf, or Private - Aquatic Pest Control	
Commercial, Golf, or Private - Fumigation	

Pursuant to A.A.C. R3-3-208.C – An individual seeking fumigation certification must first be certified as a commercial, golf, or private applicator.

Return this application, along with your \$50.00 fee for Commercial or Private or \$100.00 fee for Golf, to the address above. Please make check or money orders payable to the Arizona Department of Agriculture-ESD. The Department is required by law to process this application within 70 days from the date received. However, our goal is to process the application as timely as possible, normally this takes less than 14 days. Do not send cash! Incomplete applications or applications with incorrect funds will be returned.

The undersigned hereby makes application for a certified commercial applicator license, pursuant to A.R.S. 3-363.10(g). By my signature below I agree to conduct business as a certified commercial applicator pursuant to Title 3, Arizona Revised Statutes and Rules adopted thereto. The information contained in this application is true and accurate. I understand providing false information in the State of Arizona is a felony.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## Arizona Reciprocal Certification Eligibility Verification

Certification Information Provided to:			
<b>Mail to:</b> Arizona Department of Agriculture 1688 W. Adams Phoenix, AZ 85007	<b>Fax to:</b> Arizona Department of Agriculture (602) 542-0466 <b>Email to:</b> Licensing@azda.gov		
<b>Applicator Information: (Please Print Legal Name as Registered)</b>			
Last Name:	First Name:	MI:	
<b>Applicator License/Certification Number:</b>		<b>Applicator's State of Residence:</b>	
<b>Applicator Address Information:</b>			
Street Address (No PO Box):		Mailing Address: (if different)	
City:	State:	Zip:	
City:	State:	Zip:	
Phone Number:		Alternate Phone Number:	
<b>This Section To Be Completed By Licensing Authority From State Of Issue.</b>			
State Issued In: _____			
Type or Title of License Issued: _____ License Expiration Date: ____/____/____			
How was certification obtained? <input type="checkbox"/> Exam <input type="checkbox"/> Workshop <input type="checkbox"/> Other: _____			
Did Applicator take the National Core Exam? <input type="checkbox"/> Yes <input type="checkbox"/> No			
If no, is the National Core Exam incorporated in your category-specific exam? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Category	Category Description	Date of Certification	Certification Expiration Date
Has this applicator's certification or license been suspended, revoked, canceled, denied or is any such action pending? <input type="checkbox"/> Yes <input type="checkbox"/> No			
If yes, please explain: _____			
Did the applicator test or certify in your state? <input type="checkbox"/> Yes <input type="checkbox"/> No     If no, in which state did the applicator test? _____			
Original date of certification: ____/____/____     Test Score: _____     Applicator Certified records have been disposed: <input type="checkbox"/>			
<b>Information Completed By:</b>			
Signature: _____		Date: _____	
Name (Print): _____		Title: _____	
Agency: _____		Phone: _____	

**ARIZONA DEPARTMENT OF AGRICULTURE**  
**STATEMENT OF LAWFUL PRESENCE**  
**TO RECEIVE PUBLIC BENEFITS**  
**LICENSES**

Title IV of the federal Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (the “Act”), 8 U.S.C. §§ 1611 & 1621, provides that, with certain exceptions, only United States citizens, United States non-citizen nationals, non-exempt “qualified aliens” (and sometimes only particular categories of qualified aliens), nonimmigrants, and certain aliens paroled into the United States are eligible to receive public benefits. A professional or commercial license is generally considered a public benefit under the Act.

Arizona Revised Statutes § 41-1080 requires that an individual applying for a license issued by the Office—(i) for the purpose of operating a business in Arizona or (ii) to someone who provides a service to any person where the license is necessary in performing that service—must submit certain documentation that satisfactorily demonstrates that the applicant is lawfully present in the United States. If the documentation does not contain a photograph of the applicant, the applicant must also present a government issued document that contains a photograph.

**Directions: All individual applicants for a license covered by these laws must complete Sections I, II, and IV. Applicants who are not U.S. citizens or nationals must also complete Section III. Submit this completed form with your application for license or renewal.**

**Individuals seeking a license required to operate a business or to provide a service to any other individual or business must also submit a copy (front and back, if any) of one or more documents from the attached list that evidence your citizenship or lawful alien status with your application. If your documentation of lawful presence does not have a photograph, you must also provide a government issued id with a photograph. If the Office has evidence you have previously submitted proof of United States citizenship or a non-expiring work authorization issued by the federal government, you do not have to do so again.**

**SECTION I — APPLICANT INFORMATION**

APPLICANT’S NAME (Print or type) \_\_\_\_\_ DATE \_\_\_\_\_

TYPE OF APPLICATION (check one)    \_\_\_ INITIAL APPLICATION                    \_\_\_ RENEWAL

TYPE OF LICENSE \_\_\_\_\_

**SECTION II — CITIZENSHIP OR NATIONAL STATUS DECLARATION**

Are you a citizen or national of the United States? (check one) \_\_\_ Yes                    \_\_\_ No

If the answer is “Yes,” where were you born? List city, state (or equivalent), and country.

City \_\_\_\_\_ State (or equivalent) \_\_\_\_\_ Country or Territory \_\_\_\_\_

If you are a citizen or national of the United States, go to Section IV. If you are not a citizen or national of the United States, please complete Sections III and IV.

**SECTION III — ALIEN STATUS DECLARATION**

**Directions:** To be completed by applicants who are not citizens or nationals of the United States. Please indicate alien status by checking the appropriate box.

**“Qualified Alien” Status** (8 U.S.C. §§ 1621(a)(1), 1641(b) and (c))

- 1. An alien lawfully admitted for permanent residence under the Immigration and Nationality Act (INA).
- 2. An alien who is granted asylum under Section 208 of the INA.
- 3. A refugee admitted to the United States under Section 207 of the INA.

- 4. An alien paroled into the United States for at least one year under Section 212(d)(5) of the INA.
- 5. An alien whose deportation is being withheld under Section 243(h) or 241(b)(3) of the INA.
- 6. An alien granted conditional entry under Section 203(a)(7) of the INA as in effect prior to April 1, 1980.
- 7. An alien who is a Cuban and Haitian entrant (as defined in section 501(e) of the Refugee Education Assistance Act of 1980).
- 8. An alien who is, or whose child or child's parent is a "battered alien" or an alien subjected to extreme cruelty in the United States.

**Nonimmigrant Status** (8 U.S.C. § 1621(a)(2))

- 9. A nonimmigrant under the Immigration and Nationality Act [8 U.S.C. § 1101 et seq.] Nonimmigrants are persons who have temporary status for a specific purpose. *See* 8 U.S.C. § 1101(a)(15).

**Alien Paroled into the United States For Less Than One Year** (8 U.S.C. § 1621(a)(3))

- 10. An alien paroled into the United States for less than one year under Section 212(d)(5) of the INA.

**Other Persons** (8 U.S.C. § 1621(c)(2)(A) & (C))

- 11. A nonimmigrant whose visa for entry is related to employment in the United States.
- 12. A citizen of a freely associated state, if section 141 of the applicable compact of free association approved in Public Law 99-239 or 99-658 (or a successor provision) is in effect [Freely Associated States include the Republic of the Marshall Islands, Republic of Palau and the Federate States of Micronesia, 48 U.S.C. § 1901 *et seq.*]
- 13. A foreign national not physically present in the United States. (Applicable to professional licenses only.)

**Otherwise Lawfully Present** (A.R.S. § 1-502)

- 14. A person not described in categories 1–13 who is otherwise lawfully present in the United States. **PLEASE NOTE: Federal law may make persons who fall into this category ineligible for public benefits.** *See* 8 U.S.C. § 1621(a).

**SECTION IV — DECLARATION**

**All applicants must complete this section.** I declare under penalty of perjury under the laws of the state of Arizona that the answers I have given are true and correct to the best of my knowledge and that the document(s) submitted demonstrating lawful presence are true.

Name of document provided: \_\_\_\_\_.

\_\_\_\_\_  
APPLICANT'S SIGNATURE

\_\_\_\_\_  
TODAY'S DATE

**Attachment: List of Evidence of U.S. Citizenship, U.S National Status, or Alien Status**

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## EVIDENCE OF U.S. CITIZENSHIP, U.S NATIONAL STATUS, OR ALIEN STATUS

- (1) An Arizona driver license issued after 1996 or an Arizona nonoperating identification license;
- (2) A birth certificate or delayed birth certificate issued in any State, Territory, or Possession of the United States, including the District of Columbia, Puerto Rico (on or after January 13, 1941), Guam, the U.S. Virgin Islands (on or after January 17, 1917), American Samoa, or the Northern Mariana Islands (on or after November 4, 1986, Northern Mariana Islands local time) (unless the applicant was born to foreign diplomats residing in such a jurisdiction);
- (3) A United States Certificate of Birth Abroad: Consular Report of Birth Abroad of a Citizen of the United States (FS-240) (issued by the Department of State to U.S. citizens); Certificate of Birth (FS-545) (issued by a foreign service post); or Certification of Report of Birth (DS-1350) (copies of which are available from the Department of State);
- (4) A United States passport;
- (5) A foreign passport with a United States visa;
- (6) \* An I-94 Form with a photograph and appropriate stamp as described below;
- (7) A United States Citizenship and Immigration Services Employment Authorization Document (\* Form I-766 annotated A3, A5, or A10; or \* Form I-551: Permanent Resident Card or Alien Registration Receipt Card) or Refugee Travel Document (Form I-571);
- (8) A United States Certificate of Naturalization (N-550 or N-570);
- (9) A United States Certificate of Citizenship (N-560 or N-561);
- (10) A Tribal Certificate of Indian Blood; or
- (11) A Tribal or Bureau of Indian Affairs Affidavit of Birth.

An applicant for a license may alternatively submit the following:

- (12) A driver license issued by a State that verifies lawful presence in the United States, which does not include Alaska, Hawaii, Iowa, Illinois, Michigan, Montana, North Carolina, Nebraska, New Mexico, Nevada, Oklahoma, Oregon, Rhode Island, Texas, Utah, Vermont, Washington, or Wisconsin.
- (13) Another license issued by the federal government, any state government, an agency of this state, or a political subdivision of this state that requires proof of citizenship or lawful alien status before issuing the license.

### Acceptable stamps and annotations:

#### a. **“Qualified Aliens”**

##### ***Alien Lawfully Admitted for Permanent Residence***

- Unexpired Temporary I-551 stamp in foreign passport or on \* Form I-94.

##### ***Asylee***

- \* Form I-94 annotated with stamp showing grant of asylum under section 208 of the INA.
- \* Form I-766 (Employment Authorization Document) annotated “A5.”

##### ***Refugee***

- \* Form I-94 annotated with stamp showing admission under § 207 of the INA.
- \* Form I-766 (Employment Authorization Document) annotated “A3.”

##### ***Alien Paroled Into the U.S. for a Least One Year***

- \* Form I-94 with stamp showing admission for at least one year under section 212(d)(5) of the INA. (Applicant cannot aggregate periods of admission for less than one year to meet the one-year requirement.)

##### ***Alien Whose Deportation or Removal Was Withheld***

- \* Form I-766 (Employment Authorization Document) annotated “A10.”

##### ***Alien Granted Conditional Entry***

- \* Form I-94 with stamp showing admission under §203(a)(7) of the INA.
- \* Form I-766 (Employment Authorization Document) annotated “A3.”

##### ***Cuban/Haitian Entrant***

- Unexpired temporary I-551 stamp in foreign passport or on \* Form I-94 with the code CU6 or CU7; or
- Form I-94 with stamp showing parole as “Cuba/Haitian Entrant” under Section 212(d)(5) of the INA.

#### b. **Nonimmigrant**

- \* Form I-94 with stamp showing authorized admission as nonimmigrant.

#### c. **Alien Paroled into U.S. for Less than One Year**

- \* Form I-94 with stamp showing admission for less than one year under section 212(d)(5) of the INA.

\* Indicates a registration document.