



Arizona Department of Agriculture

Central Licensing - Pest Management Division

Physical Location: 1010 W Washington St., Phoenix, AZ 85007

Mailing Address: 1802 W Jackson St., #78 Phoenix, AZ 85007

Phone: (602) 542-3578 Fax: (602) 542-0466

Website: <https://opm.azda.gov/> | Email: licensing@azda.gov

New Business License & Qualifying Party Registration Application Requirements

Complete Application –

About the QA: including the Qualified Applicators Full Name, Arizona Pest Management Division (PMD) Qualified Certified Applicator #, Home Address, Mailing Address, Telephone Number, Email Address (if Applicable), Date of Birth, Social Security #, Certification Category(s) which are being applied to register, Signature and Date.

About the Business: including the Ownership Entity, Business Name, form of business organization (i.e. sole proprietor, LLC, Corporation...etc.), the names of the following persons authorized to act on behalf of the business:

- i. Owner if a sole proprietorship;
- ii. Managing or general partner if a partnership;
- iii. President and other authorized officers if a corporation;
- iv. All the managers or members if a limited liability company; or
- v. Person authorized to make decisions for the business if any other type of business form,

the Telephone Number, Fax number, Physical Address, Mailing Address, Email Address (if Applicable), Chemical Storage Address, and Signature of Authorized Individual & Date.

On Business License Information sheet provided please provide names of all principals of the business as defined in R3-8-202(A) "...a person who owns at least 10 percent interest in a business. Principal includes an owner that is itself a business as well as owners of a principal." Also, please provide the name and physical address of the statutory agent of the business as required in R3-8-202(A), as well as day time phone numbers for all individuals listed under persons authorized to act on behalf of the business on the application.

Application Fee – \$185.00 for New Business License and Qualifying Party Registration Application (Pursuant to R3-8-103 for Qualifying Party – Registration or broadening at the same time as application for or renewal of the business license, \$0)

Proof of Financial Security - Proof of required financial responsibility, pursuant to A.R.S. § 3-3615, provided on the PMD Proof of Financial Security form

Business Name Registration - The Business Name must be registered with the Secretary of State as a registered trade name or on file with the Arizona Corporation Commission. Please provide a copy of the Articles of incorporation, Articles of Organization, Certificate of Limited Partnership, trust, trade name certificate, partnership agreement, or other evidence of the form of business organization.

The Process – Once the application is both administratively and substantively complete, the application will be approved immediately. The applicant must complete/provide all of the following in order to be considered complete.

- ☐ Complete New Business License and Qualifying Party Registration Application
- ☐ Applicable Application Fee
- ☐ Proof of Financial Security required by A.R.S. § 3-3615
- ☐ List of names of all Principals of the business as defined in R3-8-202(A)(1)(c)(vi)
- ☐ Day time telephone numbers for individuals identified as persons authorized to act on behalf of the business
- ☐ Name and physical address of the statutory agent of the business
- ☐ Copy of the Articles of incorporation, Articles of Organization, Certificate of Limited Partnership, trust, trade name certificate, partnership agreement, or other evidence of the form of business organization.

Exclusion – An applicator shall be of good moral character. A conviction for a felony or a misdemeanor involving moral turpitude may demonstrate a lack of good moral character. A conviction for any of the following offenses shall be considered to demonstrate a lack of good moral character:

1. Murder involving the death of a law enforcement officer.
2. An offense described in A.R.S. § 13-2308.01 related to terrorism.
3. A sexual offense of any type where the victim is a minor that is a class 4 or higher felony.

Disclaimer: An agency shall not base a licensing decision in whole or in part on a licensing requirement or condition that is not specifically authorized by statute, rule or state tribal gaming compact. A general grant of authority in statute does not constitute a basis for imposing a license requirement or condition unless a rule is made pursuant to that general grant of authority that specifically authorizes the requirement or condition. This section may be enforced in a private civil action and relief may be awarded against the state. The court may award reasonable attorney fees, damages and all fees associated with the license application to a party that prevails in an action against the state for a violation of this section.

A state employee may not intentionally or knowingly violate this section. A violation of this section is cause for disciplinary action or dismissal pursuant to the Agency's adopted personnel policy. This section does not abrogate the immunity provided by section 12-820.01 or 12-820.02.



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New Business License and Qualifying Party Registration Application

Fee Schedule: ☐ New Business License - \$195.00
(includes \$10.00 Handling Fee for Paper Submission)

+ ☐ Qualifying Party Registration – No Fee Required

Qualifying Party:

Full Legal Name: _____ Qualified Applicator Certification#: _____
(REQUIRED - First Name, Middle Name, Last Name – NO INITIALS)

For Qualifying Party Registration -- Please designate appropriate categories:

<input type="checkbox"/> Industrial, Institutional, & Structural Pest Control	<input type="checkbox"/> Ornamental & Turf Pest Control	<input type="checkbox"/> Wood-Destroying Organism Inspection & Treatment
<input type="checkbox"/> Public Health Pest Control (Government Only)	<input type="checkbox"/> Right-of-Way Pest Control	<input type="checkbox"/> Wood-Destroying Insect Inspection
<input type="checkbox"/> Aquatic Pest Control	<input type="checkbox"/> Non-Soil Fumigation	<input type="checkbox"/> Wood Preservation

Qualified Applicator Signature: _____ Date: _____

Business License Applicant:

ENTITY TYPE - SELECT ONLY ONE:

- | | | | | |
|--|--|---|--------------------------------|----------------------------------|
| <input type="checkbox"/> SOLE PROPRIETOR | <input type="checkbox"/> PARTNERSHIP | <input type="checkbox"/> CORPORATION | <input type="checkbox"/> STATE | <input type="checkbox"/> SCHOOLS |
| <input type="checkbox"/> LIMITED LIABILITY COMPANY | <input type="checkbox"/> POLITICAL SUBDIVISION | <input type="checkbox"/> FEDERAL AGENCY | | |

Business Information:

Ownership Entity Name: _____
(i.e. Parent Company Name, ABC, Inc. (Corporations); XYZ, LLC. (LLCs); John Doe (Sole Proprietors); etc.)

*Business Name: _____

Telephone: _____ Fax: _____ Email Address (if applicable): _____

Mailing Address: _____ City: _____ State: _____ ZIP: _____

Physical Address: _____ City: _____ State: _____ ZIP: _____

Chemical Storage Address: _____ City: _____ State: _____ ZIP: _____

Applicants for a Business License must submit valid proof of financial responsibility. All forms of business organization, shall include information as required in A.R.S. § 3-3615 & A.A.C. R3-8-202 & R3-8-205. Applicable fees must accompany this application. Fees are not refundable. **Qualifying Party and Business Licenses expire on May 31st of each year except that a new Business license and Qualifying Party registration issued this calendar year shall expire May 31st of the following year.**

By signing this application, I affirm that I have read and understand the information contained herein and attest that all information provided is true and correct.

Authorized Signature**: _____ Date: _____
(**Authorized Signature – Sole Proprietor, Managing Partner, or Corporate Officer only)

An agency shall not base a licensing decision in whole or in part on a licensing requirement or condition that is not specifically authorized by statute, rule or state tribal gaming compact. A general grant of authority in statute does not constitute a basis for imposing a license requirement or condition unless a rule is made pursuant to that general grant of authority that specifically authorizes the requirement or condition. This section may be enforced in a private civil action and relief may be awarded against the state. The court may award reasonable attorney fees, damages and all fees associated with the license application to a party that prevails in an action against the state for a violation of this section.

A state employee may not intentionally or knowingly violate this section. A violation of this section is cause for disciplinary action or dismissal pursuant to the Agency's adopted personnel policy. This section does not abrogate the immunity provided by section 12-820.01 or 12-820

AZDA Staff Use Only

Name: _____	Date Received: _____	P.O.S. # _____
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2023.05-NBL

Business License Information

(Required information – Type preferred or Print legibly - use additional sheets if necessary)

Name and daytime telephone numbers for each individual identified as a person authorized to act on behalf of the business

<u>Name of Individual</u>	<u>Phone Number</u>

Names of all principals of the business as defined in subsection (A) of A.A.C. R3-8-202

<u>Names of Principals</u>	

Name of Statutory Agent: _____

Physical Address of Statutory Agent:

Street _____ City: _____ State: _____ Zip _____

**PROOF OF FINANCIAL SECURITY**

Proof of Financial Security must be submitted before expiration date or the license is automatically suspended. Electronic format will be accepted only if the form is signed and legible. Do not send multiple copies of the proof of financial security unless requested by PMD staff.		<u>INSURED:</u> Business License Name (as licensed by the Department): _____ PMD License No.: <u>PENDING</u> Address: _____ _____ Phone: _____ Fax / Email (optional): _____		
<u>INSURER</u> Name: _____ Address: _____ _____ Phone: _____ Fax / Email (optional): _____		<u>PRODUCER/BROKER</u> Name: _____ Address: _____ _____ Phone: _____ Fax / Email (optional): _____		
Policy Number	Eff. Date (mm/dd/yy)	Exp. Date (mm/dd/yy)	POLICY LIMITS	
			<u>Each Occurrence</u> (\$500K minimum)	\$
			<u>General Aggregate</u> (\$500K minimum)	\$
General Liability - Current law requires not less than \$500K for operations from insured's primary office and any branch office. Deductible – Cannot exceed 1% of total financial security of the policy.			Termite Damage due to Negligent Treatment (\$100K minimum if applicable)	\$
Notice of policy changes - Should the policy be cancelled, revoked or fall below the minimum limits, or if the deductible is increased to greater than 1% of the total financial responsibility, the insurer will mail written notice to the Arizona Pest Management Division within thirty (30) days.			WDIIR** (\$100K minimum if applicable)	\$
			<u>Deductible</u> - <i>Do not leave blank</i> \$0 minimum	\$
If the Business License is licensed in the Wood-Destroying Organism Treatment Category, does this business licensee provide Termite Treatments? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, Termite Damage due to Negligent Treatment Coverage in the amount of \$100,000.00 minimum is required.				
If the Business License is licensed in the Wood-Destroying Organism Treatment or Wood-Destroying Insect Inspection Category, does this business licensee provide Wood-Destroying Insect Inspection Reports? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, WDIIR Errors & Omissions Coverage in the amount of \$100,000.00 minimum is required.				
I certify that the insurance or surety bond listed above has been issued to the insured for the period indicated, and complies with Arizona Revised Statutes § 3-3615. If financial responsibility is insurance, the insured shall maintain a coverage endorsement for pesticides and herbicides, fumigation, care custody and control, rights-of-way, wood-destroying insect inspection report errors and omissions, wood-destroying organism management, and pollution transit <u>for its applicable license categories</u> . Lastly, <i>the deductible does not exceed 1% of the total financial security of this policy.</i> Please check each license category below covered by this policy.				
<input type="checkbox"/> Industrial, Institutional, & Structural Pest Control		<input type="checkbox"/> Ornamental & Turf Pest Control		<input type="checkbox"/> Wood-Destroying Organism Inspection & Treatment
<input type="checkbox"/> Public Health Pest Control (Government Only)		<input type="checkbox"/> Right-of-Way Pest Control		<input type="checkbox"/> Wood-Destroying Insect Inspection
<input type="checkbox"/> Aquatic Pest Control		<input type="checkbox"/> Non-Soil Fumigation		<input type="checkbox"/> Wood Preservation
I certify that I am a duly authorized representative of the insurance company and the company holds a valid certificate of authority or is permitted to transact surplus lines insurance in Arizona. When requested, the company agrees to furnish the PMD a complete copy of the policy, including endorsements.				
Authorized Agent Name/Title (Please Print) _____			Date _____	
Authorized Agent's Signature _____			Check one: <input type="checkbox"/> Filled out by Producer/Broker <input type="checkbox"/> Filled out by Insurer	

Proof of Financial Security

Please Reference Arizona Revised Statute **3-3615** for specific details.

The Arizona Department of Agriculture (AZDA) - Pest Management Division (PMD) will only accept the Proof of Financial Security document located on the AZDA website (<https://agriculture.az.gov/download-forms>). No other Certificates of Insurance will be accepted (i.e. Acord Certificate of Liability Insurance form).

A Business Licensee is required to provide proof of financial security in an amount no less than \$500,000.00 at all times during the licensing period.

General Aggregate – this is the maximum the insurance company will pay out.

The Proof of Financial Security must provide the deductible amount of the policy: If an insurance policy provides for a deductible, the deductible amount shall not exceed one per cent of the total financial security for each occurrence. If the deductible amount is in excess of one per cent of the total financial security for each occurrence, the business licensee shall provide other security as provided in this subsection or other evidence of financial security for the excess deductible amount.

Example: If your General Aggregate is \$2,500,000.00; your deductible cannot exceed \$25,000.00

If certified in the Wood-Destroying Organism Treatment & Inspection Category: the Business Licensee is required to have an endorsement with a minimum of \$100,000.00 pursuant to A.R.S. § 3-3615 (3)(b) for Termite Damage due to Negligent Treatment.

If certified in the Wood-Destroying Organism Treatment & Inspection or Wood-Destroying Insect Inspection Category, and performs Wood-Destroying Insect Inspection Reports (WDIIR): the Business Licensee is required to have an endorsement with a minimum of \$100,000.00 for errors and omissions (E & O) contained in the reports pursuant to A.R.S. § 3-3615 (3)(c). Business Licensees that do not provide Wood-Destroying Insect Inspection Reports are not required to have this endorsement.

If financial security is in the form of liability insurance, a licensee shall maintain a coverage endorsement for pesticides and herbicides, fumigation, care, custody and control, rights-of-way, wood-destroying insect inspection report errors and omissions, and pollution transit **for its applicable license categories.**

Certification Categories

(as prescribed in 40 CFR § 171.101 (c), (e) through (h), and (n) (82 FR 1029, 01/04/2017))

(g) Industrial, Institutional, and Structural Pest Control: This category applies to commercial applicators who use or supervise the use of restricted use pesticides in, on, or around the following: Food handling establishments, packing houses, and food-processing facilities; human dwellings; institutions, such as schools, hospitals and prisons; and industrial establishments, including manufacturing facilities, warehouses, grain elevators, and any other structures and adjacent areas, public or private, for the protection of stored, processed, or manufactured products.

(h) Public Health Pest Control (Government Only): This category applies to State, Tribal, Federal or other governmental employees and contractors who use or supervise the use of restricted use pesticides in government-sponsored public health programs for the management and control of pests having medical and public health importance.

(e) Aquatic Pest Control: This category applies to commercial applicators who use or supervise the use of any restricted use pesticide purposefully applied to standing or running water, excluding applicators engaged in public health related activities included in *as specified in paragraph (h)* of this section. pest management, including weeds and mosquito larvae, in standing or running water.

(c) Ornamental & Turf: This category applies to commercial applicators who use or supervise the use of restricted use pesticides to control pests in the maintenance and production of ornamental plants and turf.

(f) Right-of-Way: This category applies to commercial applicators who use or supervise the use of restricted use pesticides in the maintenance of roadsides, powerlines, pipelines, and railway rights-of-way, and similar areas.

(n) Non-Soil Fumigation: This category applies to commercial applicators who use or supervise the use of a restricted use pesticide to fumigate anything other than soil.

State Only Categories

Wood-destroying organism treatment: Inspecting for the presence or absence of wood-destroying organisms and treating for wood-destroying organisms in or about a residential or other structure by a means other than use of a fumigant.

Wood-destroying insect inspection: Inspecting for the presence or absence of wood-destroying insects only and excluding preparing treatment proposals.

Wood preservation: Application of pesticides labeled for use on utility poles or railroad ties, directly to structural components of wood or wood products, to prevent or manage wood degradation by wood destroying organisms including fungi and bacteria, which are not part of an existing structure. This includes drilling a cavity into a structural timber, inserting a methylisothiocyanate or other similar product into the cavity, and sealing the cavity.

All information is available on the AZDA website located at: <https://agriculture.az.gov/>