

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

Applicator Certification Application Requirements

A complete application includes:

Information about the applicant – including the applicants Full Name; Applicator Certification # (if Broadening); Home Address; Mailing Address; Telephone Number; Email Address (if Applicable); Date of Birth; Social Security #; Denied, Suspended, or Revoked question answered; Certification Category(s); Signature and Date.

Application Fee – \$55.00 for New Applicator Certification applicants or No Fee for Broadening Applicator Certification applicants

Handling Fee – The \$10.00 Handling Fee is applicable because this application is available for processing online.

Statement of Lawful Presence to Receive Public Benefits – Please submit the Arizona Statement of Lawful Presence to Receive Public Benefits along with the appropriate evidence as listed.

Background Investigation for New Applicator Applicants – in accordance with A.R.S. § 3-3614 C – New CA and New QA applicants shall submit a full set of fingerprints on the "blue-lined" fingerprint card (FD-258); a Cashier's Check or Money Order in the amount of \$22.00 made payable to the Arizona Department of Public Safety (AZDPS). Additionally, the Federal Bureau of Investigations (FBI) requires the applicant to include the completed FBI Notification of Applicant Privacy Rights; and the AZDPS requires the applicant to include the Fingerprint Verification Form – completed by the Fingerprint Technician and sealed according to the instructions on the form.

In accordance with A.R.S. § 3-3614 D - An individual who applies for certification as a new Applicator or a new Qualified Applicator may meet the requirement prescribed in subsection C of this section by submitting a current, unexpired Fingerprint Clearance Card issued pursuant to section 41-1758.03 or a current, unexpired Level I Fingerprint Clearance Card issued pursuant to section 41-1758.07 to the Department as part of the individual's application.

<u>The Process</u> - Upon submission of a complete application the applicant may schedule testing on the next business day. Certification will be issued once the applicant's application is administratively and substantively complete by providing the following:

- □ Complete Applicator Certification Application
- □ Applicable application fee
- □ Statement of Lawful Presence to Receive Public Benefits
- □ Applicable Evidence of Lawful Presence to Receive Public Benefits
- □ Background Investigation completed by the Arizona Department of Public Safety and U.S. Federal Bureau of Investigations, or current, unexpired Fingerprint Clearance Card issued pursuant to section 41-1758.03 or a current, unexpired level I fingerprint clearance card issued pursuant to section 41-1758.07
- □ Score of 75% or higher all applicable exams (Core and at least one Category Specific Exams for New Certification Applicants or Category Specific Exams for Broadening Applicants)



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Applicator Certification Application

Fee Schedule: □ New Certification - \$65.00 (Handling Fee of \$10.00 already included) □ Broaden Certification - \$10.00 (Handling Fee of \$10.00 already included)

Full Legal Name:	(REQUIRED - First Name, Middle Name,	Last Name – NO INITIALS)	Certification #:	(if applicable)
Mailing Address:		City:	State: ZIP:	
Home Address:		City:	State: ZIP: _	
Telephone:		E-Mail Address:		
Date of Birth:		Social Security #:		
Government Emp	loyee? 🗆 Yes 🗆 No			
Employer:	yer:AZDA PMD Bus. License #: _			
Telephone #:				(if applicable)

Has this applicant ever been convicted of a misdemeanor involving moral turpitude or any felony*? Yes No

(An offense that is undesignated, set aside, or has been expunded, is still considered a conviction. Please request and supply the information required on the Applicant with Criminal Conviction Supplement.) If you have any doubt whether your type of conviction must be disclosed, disclose it for the Department to consider. Failure to disclose all relevant convictions may result in denial of certification.

Has this applicant ever had any license or permit to practice pest management denied, revoked, or suspended? If yes, please provide the date, jurisdiction taking the action, nature of the action, and explanation of the circumstances on a separated document that is typed and contains the applicant's printed name and signature.

Pest Management Categories: (the following categories will be accessible upon approval of application)

Industrial, Institutional, & Structural Pest Control Public Health Pest Control (Government Only) Aquatic Pest Control Ornamental & Turf Pest Control Right-of-Way Pest Control Non-Soil Fumigation Wood-Destroying Organism Inspection & Treatment Wood-Destroying Insect Inspection Wood Preservation

Return this application along with the indicated fee to the address above. The AZDA is required by law to process applications within 90-days from the date a completed application received. However, our goal is to process the application as timely as possible. Normally this takes less than 14-days.

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.

NOTE: Incomplete, illegible, or inaccurate applications cannot be deemed complete. Examination fees shall be paid directly to the testing vendor and are not a part of this application. **Certifications expire on May 31st of each year except that a new certification that is issued during this calendar year shall expire on May 31st of the following year.** The Arizona Statement of Lawful Presence to Receive Public Benefits and proof may be required.

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 and I understand providing false information to an agent of the State of Arizona is a criminal offense.

Applicant Signature:	Date:	
ADA STAFF USE ONLY Name:	Date Received:	POS #
Nanc.	Date Received.	105#

Persons with disabilities may request reasonable accommodations by contacting the Americans with Disabilities Act Coordinator at (602) 542-3578. Requests should be made as early as possible to allow time to arrange the accommodation. [Rev. - 2023.05]



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STATEMENT OF LAWFUL PRESENCE TO APPLY FOR STATE ISSUED CERTIFICATION/LICENSE

Arizona Revised Statutes § 41-1080 requires an individual applying for a license issued by the Department—(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 or certification covered by these laws must complete this form and provide evidence by submitting a copy (*front and back, if any*) of one or more documents from the lists below declaring your citizenship or lawful alien status with your application. If your documentation of lawful presence does not have a photograph, you must government issued id with a photograph. If the Department 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. *Please DO NOT provide a copy of your Social Security Card.*

EVIDENCE OF LAWFUL PRESENCE, CITIZENSHIP, NATIONAL OR ALIEN STATUS

- A driver license issued by a state that verifies lawful presence in the United States. Expiration Date:
- A birth certificate or delayed birth certificate issued by any state, territory or possession of the United States
- □ A United States certificate of birth abroad which includes a report of birth abroad of a U.S. citizen (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); Statement provided by a U.S. consular official certifying that the individual is a U.S. citizen
- □ An I-94 Form with a photograph. Expiration Date: _
- □ A United States Certificate of Naturalization (Form N-550 or N-570)
- □ A United States Passport
- $\hfill\square$ A foreign passport with a United States visa.
- □ A United States Certificate of Citizenship (Form N-561)
- □ A Tribal Certificate of Indian Blood.
- □ A Tribal or Bureau of Indian Affairs Affidavit of Birth
- □ A United States Citizenship and Immigration Services Employment Authorization document or Refugee Travel document. Expiration Date: ______

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.

Applicant's Signature

Today's Date

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