

Pest Control / Company Renewal-Principal License Plant Industry



Urban and Structural Principal License

(Departmental Use Only, Lic.#: _____)

Primary Principal
 Location Principal
 Principal
 Name: _____
 Home Address: _____
 P.O. Box: _____
 City/State/Zip: _____
 Home Phone: (____) _____
 Are you a Nevada Resident? Yes No
 Drivers License State/Number: _____

YOU MUST MARK THE APPROPRIATE RESPONSE OR YOUR LICENSE APPLICATION WILL BE DENIED (NRS 555.290, 555.325)!

I am not subject to a court order for the support of a child.
 I am subject to a court order for the support of one or more children and am in compliance with the order or am in compliance with a plan approved by the district attorney or other public agency enforcing the order for the repayment
 I am subject to a court order for the support of one or more children and am not in compliance with the order or plan approved by the district attorney or other public agency enforcing the order.

I have acquired the minimum number of Pesticide CEU's necessary to re-instate my Nevada pest control license.

Course #	Course Title	Provider	CEU's

Applicant's Social Security number: _____ - _____ - _____

Signature of applicant: _____

Date: _____

Agricultural Ground

Urban/Structural

B1 B2 B3 B4 B5
 C1 C2 C3 C4 C5 C6 C7 C8

For Departmental Use Only

COMPANY NAME: _____ COMPANY NUMBER _____

Insurance Checked By: _____ Date: _____ License Approved By: _____ Date: _____

License Issued By: _____ Date: _____ Receipt No. _____

License Status ___ New ___ Renewal Permanent License Number: _____ Date Mailed _____

405 South 21st St.
Sparks, NV 89431

2300 East St. Louis Ave.
Las Vegas, NV 89104

4780 East Idaho St.
Elko, NV 89801