

2017 RENEWAL INFORMATION FOR DPR LICENSE AND CERTIFICATE HOLDERS

Dates for Renewal

DPR encourages submitting completed renewal applications to DPR by November 1, 2017, to receive your license/certificate by December 31, 2017. If submitted after November 1, you may not receive your license/certificate by January 1.

Processing time is 60 days.

Note that submitting your renewal before October, will ensure you have your license by early December and allow you to renew with the County by the New Year.

To check if you're renewed, go to DPR's website:
<www.cdpr.ca.gov/docs/license/currlic.htm>

Address Changes

Always notify DPR immediately of any address or name changes.

Mailing of Renewal Packets

DPR is mailing renewal packets in August to provide sufficient time for license and certificate holders to submit their applications by November 1. Renewal applications must be postmarked on or before December 31, or a late fee applies.

If you did not receive your renewal application or lost it, download a renewal packet from DPR's website:
<www.cdpr.ca.gov/docs/license/liccert.htm> or email us and request a copy.

Business License Renewal Application

The following forms will be included in the renewal packet:

- Business Renewal Application PR-PML-192
- Renewal Information Requirements PR-PML-140
- Visa/MasterCard Transaction DPR-105

Renewal applications must be filled out completely, signed, and submitted with the correct fee.

Note: Your qualified applicator must be renewed before your business license can be renewed.

Individual License and Certificate Renewal

The following forms will be included in the renewal packet:

- Renewal Application PR-PML-141
- License/Certificate Renewal Information Request
- CE Records Renewal Summary PR-PML-123
- Visa/MasterCard Transaction DPR-105

Renewal applications need to be signed and must include the required CE records summary and correct fee.

Continuing Education

License and certificate holders must keep copies of their CE records for three years. DPR may request copies of your CE records at any time.

Submit the CE Records Renewal Summary, PR-PML-123 or a summary record of CE attendance from a third party professional association.

Your CE records must include:

- License/Certificate Holder's Name
- License/Certificate Number and Type
- Course Location
- Course Title
- Course Date
- DPR Course I.D. Number
- Course hours attended for each CE category
- Name of instructor or sponsoring organization
- Your Signature

General Information about CE Courses

DPR does not track CE hours for individuals, but has the ability to audit CE records.

DPR approved CE hours must be obtained during the valid period of the license or certificate. The valid period is listed on the license or certificate (from the 'date of issue' until the 'valid through' date). NO grace period is given to obtain CE hours. NO CE hours can be carried over to the next renewal period.

If renewing multiple licenses or certificates, you only need sufficient CE hours to meet the license with the most CE hours required.

Questions about your CE hours?

For questions about your CE hours, you must contact the course sponsor or your professional association.

See DPR's website for current or previous years' courses and sponsors' contact info:

<http://www.cdpr.ca.gov/docs/license/cont_ed_cfm/classes.htm>

DPR List Serve

Sign up for important information and updates from DPR about Licensing and CE:

<www.cdpr.ca.gov/docs/dept/listserv/sub1113.htm>

License or Certificate Type	DPR Staff Name and Contact Information
General Questions	<p style="text-align: center;">LicenseMail@cdpr.ca.gov</p>
Pest Control Advisers	<p style="text-align: center;">Rebecca Olson Rebecca.Olson@cdpr.ca.gov</p>
Qualified Applicator License/ Certificate	<p style="text-align: center;">Heather Allen Heather.Allen@cdpr.ca.gov</p>
	<p style="text-align: center;">Kenneth King Kenneth.King@cdpr.ca.gov</p>
	<p style="text-align: center;">Elizabeth Dummert Elizabeth.Dummert@cdpr.ca.gov</p>
Pest Control Businesses	<p style="text-align: center;">Alpha: A-D, S,T, U-Z Regina Maglia Regina.Maglia@cdpr.ca.gov</p>
	<p style="text-align: center;">Alpha: E-L, M-R, V Shernee Tousant Willie.Tousant@cdpr.ca.gov</p>
Pilots (APC/JPC)	<p style="text-align: center;">Regina Maglia Regina.Maglia@cdpr.ca.gov</p>
Dealer Designated Agents	<p style="text-align: center;">Elizabeth Dummert Elizabeth.Dummert@cdpr.ca.gov</p>

STATE OF CALIFORNIA
**PEST CONTROL DEALER LICENSE
RENEWAL APPLICATION**

PR-PML-191 (REV. 9/04)
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DEPARTMENT OF PESTICIDE REGULATION
PEST MANAGEMENT AND LICENSING BRANCH
LICENSING AND CERTIFICATION PROGRAM
1001 I STREET
SACRAMENTO, CALIFORNIA 95814-2828
(916) 445-4038
FAX - (916) 445-4033
Web site: <http://www.cdpr.ca.gov/>

Name Change Address Change

Business License Number: _____

Business Name: _____

Address: _____

City, State, Zip: _____

IMPORTANT - PLEASE READ
COMPLETE ALL INFORMATION FOR EACH LOCATION AND THE RENEWAL INFORMATION REQUIREMENTS

Qualified Person. Each business location must have a qualified person who possesses a valid Agricultural Pest Control Adviser License, Pest Control Dealer Designated Agent License, Pest Control Pilot Certificate, or Qualified Applicator License to engage in pest control from each location. If you need additional space, attach a separate sheet of paper.

Main/Branch License Number	Business Location Address	Qualified Person's Name and License Number
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Fees. See Page 2 (instructions) to determine fees based on the number of business location(s) and payment methods. **ALL FEES ARE NON-TRANSFERABLE AND NON-REFUNDABLE.**

Indicate Amount Enclosed: \$ _____

I declare under penalty of perjury, under laws of the State of California, that the above information provided by me is true and correct.

SIGNATURE

TITLE

DATE SIGNED

FOR OFFICIAL USE ONLY

IMPRINT

PROBLEM

RENEWED

DATA ENTRY

RC

Instructions on reverse

PEST CONTROL DEALER LICENSE RENEWAL APPLICATION INSTRUCTIONS

PR-PML-191 (REV. 9/04)

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RENEWAL TIME LINE

Renewal time lines have been established to help determine when you may expect to receive your license or certificate based on the date your renewal application is received by the Licensing and Certification Program. Renewal time lines are posted on the Department of Pesticide Regulation's (DPR's) web site.

CHECK LIST: This list will help ensure that your renewal application is completed in full prior to mailing.

- Change of Name/Address.** 3CCR Section 6508 requires all license/ certificate holders to notify DPR immediately of any change in business name, address, qualified person, business organization, or any other information required on the application. Indicate any corrections that appear on the renewal form in the space provided.

Licenses are not transferable. In the case of change of business organization or ownership, a new application is required. If you had a change in ownership or partners or have incorporated, contact us.

- Qualified Person.** Each pest control business location (Main or Branch) must have a qualified person who possesses a valid Agricultural Pest Control Adviser License, Pest Control Dealer Designated Agent License, Pest Control Pilot Certificate, or Qualified Applicator License to engage in pest control from each location. Provide the name(s), license/certificate type(s), and license/certificate number(s) of the qualified person who is responsible for each location in the space provided on the renewal form. If additional space is needed, attach a separate sheet of
- Fees. All fees are non-transferable and non-refundable.** Fees must be paid for each pest control license location (Main and Branch) as totaled on the renewal form. A late penalty fee of fifty percent (50%) of the total renewal fee will be assessed for each license **postmarked after December 31.**

License Renewal (2 Year) and Late Penalty Fees

	Renewal	Late Fee		Renewal	Late Fee
Pest Control Dealer License (Main)	\$320.00	\$160.00	Pest Control Dealer License (Branch)	\$160.00	\$80.00

- Declaration/Signature.** Sign, title and date the renewal application form.
- Payment.** Enclose a check, money order or credit card payment payable to "Cashier, Department of Pesticide Regulation".
- Mail.** Send payment, completed renewal application form, and all required documents in the enclosed envelope addressed to: Cashier, Department of Pesticide Regulation, P.O. Box 4015, Sacramento, California 95812-4015.

Questions? Your name and license/certificate number will be posted to DPR's web site as soon as your application is approved and logged into the database. Our web site address is <http://www.cdpr.ca.gov/docs/license/currlic.htm>. For other questions about your application, please contact the Licensing and Certification Program at (916) 445-4038.

Failure to complete or provide the requested information may delay the processing of your application.

STATE OF CALIFORNIA
**PEST CONTROL DEALER BUSINESS LICENSE
RENEWAL INFORMATION REQUIREMENTS**

PR-PML-134 (EST.7/01)

DEPARTMENT OF PESTICIDE REGULATION
PEST MANAGEMENT AND LICENSING BRANCH
1001 I STREET
SACRAMENTO, CA 95814-2828
P.O. BOX 4015
SACRAMENTO, CA 95812-4015
(916) 445-4038
FAX (916) 445-4033
Web site: <http://www.cdpr.ca.gov>

A. Officer/Owner Information	Fax #	E-mail address	Business Phone Number
Officer/Owner Name 1.		Title	
2.			
3.			
4.			

C. Pest Control Sales Information

Please indicate what type of product your pest control dealer business sells.

Check the appropriate box(es).

- Sell Agricultural Use Pesticides.
- Sell California or Federal Restricted Use Pesticides.
- Sell California or Federal Restricted Use Pesticides and Agricultural Use Pesticides.
- Sell Antifouling Paints or Coatings Containing Tributyltin.
- Sell Non-Agricultural Use Pesticides.
- Sell Methods or Devices (such as Biological Control Agents, Lures or Insect Trapping Devices) for the Control of Agricultural Pests.

VISA/MASTERCARD TRANSACTION



Mail completed application with this payment form to:

For Licensees:

ATTN: Cashier
Department of Pesticide Regulation
P.O. Box 4015
Sacramento, CA 95812

For Continuing Education Sponsors:

Cashier
ATTN: CE
Department of Pesticide Regulation
P.O. Box 1379
Sacramento, CA 95812

ALL SECTIONS MUST BE COMPLETED. **DO NOT E-MAIL OR FAX this form.**

FAILURE TO COMPLETE ALL SECTIONS WILL RESULT IN YOUR APPLICATION BEING DELAYED OR REJECTED.

NAME OF CARDHOLDER (NAME APPEARING ON THE CARD)

VISA or MASTERCARD ONLY. No other cards are accepted.

CHECK ONE: VISA MASTERCARD

CARD NUMBER
(16 DIGITS)

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Expiration Date

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Total Amount of Payment

SIGNATURE OF CARDHOLDER (NAME APPEARING ON THE CARD)

PAYMENT FOR:

MAILING ADDRESS (Street or P.O. Box Number)

City, State, and ZIP Code

TELEPHONE NUMBER (including area code)

(DEPARTMENT USE ONLY) - ENTERED ON POS BY:

TODAY'S DATE

DATE MAILED

BY: