## Individual License/Certificate Renewal Application

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Department of Pesticide Regulation Licensing and Certification Program PO Box 4015 Sacramento, California 95812-4015 E-Mail: LicenseMail@cdpr.ca.gov Web site: http://www.cdpr.ca.gov/

### Return application and continuing education (CE) hours by mail.

The mailing address indicated on this application is your address of record for your license/certificate, therefore, it is public information.

To use a post office box in lieu of the physical address or to submit any other address change, indicate in box below.

License/Certificate Holder Information			Employer/Business Information					
Name:			Employer/Business Name:					
Address:								
City, State, ZIP:								
Cell or Home Phone Number:			Business Phone Number:					
E-Mail Address:				Informatio	n is Correct	Information has 0	Changed (see belov	
Information is Correct Information	below)							
	Info	ormation	Correction	าร				
License/Certificate Holder Information:								
Employer/Business Information:								
CE hours of Continuing Education.	For Complement be completed					/certificate.		
- Excess "Laws" hours can be used towards "Of	her." Only pest contro	ol aircraft p	lots may u	se excess	s "Aerial" ho	urs towards "Other."		
Current License/Certificate Number(s), Type, and Category(ies)	Renewal License/ Certificate? (Circle Y or N)	Required CE hours to renew all licenses and certificates				Renewal Fees	Late Fees	
		Laws	Aerial	Other	Total CE Hours	Postmarked on or before 12/31	Postmarked after 12/31 (see page 3)	
	Y/N	_				\$		
	Y/N Y/N	1				<u>\$</u> \$		
	Y/N					\$		
		Laws	Aerial	Other	Total CE Hours	Total Due (Include late fees if applicable)		
Enter the number of CE hours you have	completed.							
Continuing Education Record Renewal Su application.  Fees. All fees are non-transferable and		continuing	Educatio	n Record	d Renewal	Summary located or	າ page 2 of this	
Medical Certificate Card. Manned Apprer		an Pilots	must sub	mit a con	)V			
Vector Control Technician certification	•					ts must submit a cop		

I declare under penalty of perjury, under laws of the State of California, that the submitted information is true and correct.						
Signature	Date Signed					

State of California

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 $Instructions \ \ {\tiny ({\it Electronic fillable copies of this form are available on DPR's website.)}}$ 

1. Before the "Continuing Education Course Information" section, enter the follo certificate/license number. For each approved continuing education (CE) course sponsor, DPR course I.D. code, location of course, course completion date, and approved courses and obtained during the valid period of your license/certificate period. You must meet the minimum required CE hours for "Laws" and "Aerial".	e completed, enter the d hours attended in ea e. Excess CE hours ca	following: title ch CE category annot be carried	of course, name of CE /. CE hours must be DPR- d over to your next renewal						
period. You must meet the minimum required CE hours for "Laws," and "Aerial," if required; extra hours in "Laws" may be applied towards "Other."  Only pest control aircraft pilots may use excess "Aerial" hours towards "Other." In the boxes located in the bottom right- hand corner, enter the total number of CE hours you have completed for the current renewal period. The Continuing Education Record Renewal Summary form must be returned with your renewal application. If the information on this form is incomplete, the processing of your renewal will be delayed.					CE Hours Completed				
Use an additional sheet of this form if necessary.  2. Do not submit application and fee unless all required CE hours have been comby December 31 of your expiration year, you will be required to re-examine in laperson who violates California's pesticide laws and regulations including making or misrepresentation with meeting any license requirement is subject to penaltic Applicant Name  Continuing Course Education Information	aws and regulations, a g a false or fraudulent	s well as categ statement, reco	ories you want to hold. A ord, report, or use any fraud	Laws and Regulations (L)	Aerial Application and Techniques (A)	Other (O)	Total Hours (T)		
Course Title		DPR Course I.I	D. Code	(1)	l		(T)		
Name of CE Sponsor		Course Comple	tion Data	(L)	(A)	(O)	(T)		
Location (City and State)		Course Comple	non Date						
Course Title		DPR Course I.I	). Code	(L)	(4)	(0)	<b>(T</b> )		
Name of CE Sponsor		Course Completion Date			(A)	(0)	(T)		
Location (City and State)		Course Compie	uon Bate						
Course Title		DPR Course I.I	). Code	(L)	(A)	(O)	(T)		
Name of CE Sponsor		Course Comple	tion Date						
Location (City and State)									
Course Title		DPR Course I.I	). Code	(L)	(A)	(O)	(T)		
Name of CE Sponsor		Course Comple	tion Date						
Location (City and State)									
Course Title		DPR Course I.I	). Code	(L)	(A)	(O)	(T)		
Name of CE Sponsor		Course Comple	tion Date	(-/	T	(-,	(-,		
Location (City and State)									
Course Title		DPR Course I.I	). Code	(L)	(A)	(O)	(T)		
Name of CE Sponsor		Course Comple	tion Date	(-)	T	( <b>0</b> )	( ' '		
Location (City and State)		·							
Course Title  Name of CE Sponsor		DPR Course I.I	). Code	(L)	(A)	(O)	(T)		
,		Course Comple	tion Date						
Location (City and State)									
			Total CE Hours						

#### **Individual License/Certificate Renewal Application Instructions**

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

DPR will only disclose personally identifiable information, such as home phone number and personal email address, to third parties as required by state or federal law or regulation and consistent with the Information Practices Act (Civ. Code, sections 1798-1798.78).

**Changes in Information:** License/certificate holders shall notify DPR immediately of any changes in information including, but not limited to: name changes, address changes, phone number changes, and employer/business information changes. Name changes shall include a copy of government-issued identification as proof of identity and name change. This proof of identity shall include the individual's previous name and their new name. Indicate any corrections to the information included on the front of the renewal form in the space provided.

License(s)/Certificate(s) to be renewed: Verify or list all license(s) and/or certificate(s) to be renewed.

Submit a Continuing Education Records Renewal Summary form located on page 2 of this application. <u>Electronic fillable copies of this form</u> are also available on DPR's website. Please note the following when submitting CE hours:

- CE hours must be DPR-approved courses and obtained during the valid period of your license/certificate.
- Excess CE hours cannot be carried over to your next renewal period.
- You must meet the minimum required CE hours for "Laws," and "Aerial," if required; extra hours in "Laws" may be applied towards "Other." Only pest control aircraft pilots may use excess "Aerial" hours towards "Other."
- If renewing multiple licenses or certificates, you only need to complete CE hours for the license or certificate with the most CE hours required, including specific category hours required (e.g. "Aerial").

**Medical Certificate Card (Manned Apprentice and Journeyman Pilots Only):** Submit a copy of your valid medical certificate card issued by the Federal Aviation Administration. DPR requires this information to determine compliance with Food and Agricultural Code Section 11901(a).

**Department of Public Health Vector Control Technician certification (Category B-mosquito):** Unmanned Vector Control Technician pilots are required to submit a copy of their certification.

**Fees:** All fees are non-transferable and non-refundable. Fees must be paid for each renewed license and/or certificate. A late penalty fee of fifty percent (50%) of the renewal fee will be assessed for each license and/or certificate **postmarked** after **December 31**.

#### License Renewal (2 Year) and Late Penalty Fees

License Type	Fee	Late Fee	License Type	Fee	Late Fee
Agricultural Pest Control Adviser	\$140.00 320	\$ <del>70.00</del> 160	Qualified Applicator Certificate	\$ <del>60.00</del> <u>140</u>	\$ <del>30.00</del> 70
Qualified Applicator License	\$ <del>120.00</del> 270	\$ <del>60.00</del> 135	Dealer <u>Loesignated Agent</u> License	\$ <del>50.00</del> 110	\$ <del>25.00</del> <u>55</u>
Pest Control Aircraft Pilot Certificate, Manned	\$ <del>90.00</del> 200	\$4 <del>5.00</del> 100	Pest Control Aircraft Pilot Certificate, Unmanned	\$ <del>90.00</del> 200	\$4 <del>5.00</del> 100

Declaration/Signature: Sign here to indicate that all of the information submitted is true and correct.

**Payment:** Enclose a check or money order payable to "Cashier, Department of Pesticide Regulation" or credit card payment.

#### Mail:

- Send payment;
- Completed renewal application form including the Continuing Education Records Renewal Summary form;
- Pilot's Federal Aviation Administration medical certificate or Vector Control certification (if applicable); and
- Mail to:

Department of Pesticide Regulation

Attn: Cashier MS-4A

PO Box 4015 Sacramento, CA 95812-4015

**Questions?** Your name and license/certificate number will be posted to the valid license list on DPR's Web site as soon as your application is approved and logged into the database. For other questions about your application, please contact the Licensing and Certification Program at (916) 445-4038 or by E-Mail at LicenseMail@cdpr.ca.gov.