

Stanislaus County

Agricultural Commissioner's Office and Sealer of Weights & Measures 3800 Cornucopia Way, Suite B Modesto, CA 95358

Application for Pest Control Equipment Registration

| For Calendar Year Ending December 31, 20(Year) | | | | | |
|--|---------------|---------------|------------------------------------|-----------------------------------|------------------|
| For Registration in | County o | f: | | | |
| Pest Control Busin | ess Name: | | | | |
| List below all equipme | ent to be use | ed in this co | unty. Indicate applicable types of | f equipment: For Aicraft, show fi | xed wing or |
| Helicopter. For Groun | nd, show spe | eed sprayer, | power duster, hand fun, backpac | k sprayer, etc. | |
| Manufacturer | Air | Ground | Equipment Type | Vehicle Lic. Or Aircraft "N" No. | Other I.D |
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| I herby certify that n true and correct. | ny ground | equipment | is properly marked and that th | e information contained in this | s application is |
| | | | | | |
| Signature | | | | | Date |