



Application for a Permit to Sell or Transfer Restricted Use Pesticides under the Delaware Pesticide Law

I hereby apply for a permit to sell or transfer Restricted Use Pesticides in accordance with regulations adopted under Section 21 of the Rules and Regulations of the Delaware Pesticide Law.

PLEASE TYPE OR PRINT

Dealer Permit No. _____

Name of Contact Person _____

Contact Person/Phone Number _____

Dealership Name _____ Fax# _____

Address _____

City _____ State _____ Zip Code _____

I certify that I understand my legal responsibilities for the sale of Restricted Use Pesticides and that I will sell Restricted Use Pesticides only to individuals who possess a valid Pesticide Applicators Certificate.

Signature _____ Date _____

The annual fee for a Restricted Use Pesticide Dealer Permit is \$25.00 and is payable to the Delaware Department of Agriculture.

CHECK/MONEY ORDER

Fee - \$25.00

Make Check or Money Order

Payable to:

**Delaware Department of
Agriculture**

NEW!!!

Visa

Billing Name: _____
Credit Card Billing
Address: _____

City/State/Zip: _____

Credit Card Number: _____

Expiration Date: _____ / _____

Authorization: _____

CREDIT CARD

Fee - \$25.00

MasterCard

Discover

*CVC# _____

is on the back of the card; 3 or 4
digits

Month

Year