

CODE:	
FOR OFFICIAL USE ONLY	<b>′</b>

## APPLICATION FOR LICENSE OF PESTICIDES AND NON-CHEMICAL PEST CONTROL DEVICES

1. Firm Name					
2. Mailing Address	City	State	Zip Code		
3. Name of Person Responsible for License	Title	Telephone	Telephone Number		
Fax Number	E-mail Address				
4. Principal Hawaii Distributor	Address		Zip Code		
5. Brand Name (Exactly as shown on label)					
EPA Registration Number		EPA Establishment	t Number		
Confidential Statement of Formula (EPA Form No. 857	70-4)	g submitted by basic registrant			
Non-Chemical Pest Control Device Supporting Data Package:   □ Is attached □ Being submitted by manufacturer					
Microbial Product Permit from Hawaii Department of A			manufacturer or dealer		
Firm Name on Label (If differs from Item 1)	grioditaro, i farit Quarantino.		manufacturer or dedict		
,					
6. Type of Pesticide (Check each applicable item)	□ Non-Chemical Pest Control De	evice			
□ Insecticide □ Fungicide □ Herbicide	□ Rodenticide □ Nematicio	de □ Algicide □ Germicid	le □ Other		
7. Type of Formulation	Noderitione   Nematicity	Aigicide Germicid	de d'ulei		
□ Dust □ Wettable Powder □ Pressurize	d Product 🛘 🗆 Granular 🔻 🗀 Em	nulsifiable Liquid   □ Bait	□ Other		
Type of Containers and Sizes					
Signature of Authorized Representative	Type or Print Name		Date		
9. Signature of Authorized Representative	Type of Fillit Name		Date		
(For State Use Only)	License Period				
CERTIFICATE OF LICENSE					
When signed under authority of the Chairperson, Board of Agriculture, this certifies that the pesticide / device named					
above is duly licensed, license fee paid ther pursuant to provisions of the Hawaii Pesticion					
Rules, Chapter 66, Pesticides, Title 4, Depa		revised clatates) and the r	tariii ii oti ativo		
	g				
Date Issued					
Receipt No.	Adminis	trator, Division of Plant Industry			