Department of Food and Agriculture

KERN COUNTY

Pesticide Use Enforcement and Licensing APPLICATION FOR AGRICULTURAL PEST CONTROL EQUIPMENT REGISTRATION

FOR CALENDAR YEAR ENDING DECEMBER 31,

NAME – (under which applicant is engaged in business)

LIST BE Type	E OF EQUI	PMENT: FOR	AIRCRAFT, SHOW FI	S COUNTY. INDICATE APPLICABLE IXED WING OR HELICOPTER, FOR DUSTER, HAND GUN, ETC.	
Manufacturer	Air	Ground	Equipment Type	Vehicle Lic. Or Aircraft "N" No.	Other I.D.
I HEREBY CERTIFY THAT	MY GRO	UND EQUIP	MENT IS PROPERL	Y MARKED AND THAT THE INFORM	ATION

CONTAINED IN THIS APPLICATION IS TRUE AND CORRECT.	•
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SIGNATURE