

**PEST CONTROL BUSINESS COUNTY REGISTRATION**

STATE OF CALIFORNIA  
DEPARTMENT OF PESTICIDE REGULATION  
PEST MANAGEMENT AND LICENSING BRANCH

<p>_____ LIC. EFFECTIVE DATE                      LIC. EXPIRATION DATE</p> <p>_____ (QAL) PCO LICENSE NUMBER                      CATEGORIES</p> <p>NAME: _____</p> <p>ADDRESS: _____</p> <p>CITY _____ STATE _____ ZIP CODE _____</p> <p style="text-align: center;"><b>PEST CONTROL CARD INFORMATION AREA</b> (ATTACH COPY OF PEST CONTROL BUSINESS LICENSE)</p>	<p><b>REGISTRATION EXPIRATION DATE: DECEMBER 31, 2023</b></p> <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:70%;">FOR REGISTRATION IN COUNTY OF: <b>RIVERSIDE</b></td> <td style="width:30%;">BUSINESS LOCATION <input type="checkbox"/> MAIN    <input type="checkbox"/> BRANCH</td> </tr> </table> <p>BUSINESS NAME: _____ _____ BUS. LIC. # _____</p> <p>ADDRESS: _____</p> <p>CITY: _____ STATE: _____ ZIP: _____</p> <p>BUS. PHONE # : _____ EMAIL ADDRESS: _____</p> <p>QAL SIGNATURE: _____ DATE: _____</p> <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:70%;">Restricted Material(s) Possession Permit No. _____ No Restricted Material may be possessed except in accordance with any attached condition(s). This is not a permit to apply.</td> <td style="width:30%;">CONDITION(S) ATTACHED <input type="checkbox"/> YES    <input type="checkbox"/> NO</td> </tr> </table> <p>AGRICULTURAL COMMISSIONER'S SIGNATURE _____ DATE _____</p>	FOR REGISTRATION IN COUNTY OF: <b>RIVERSIDE</b>	BUSINESS LOCATION <input type="checkbox"/> MAIN <input type="checkbox"/> BRANCH	Restricted Material(s) Possession Permit No. _____ No Restricted Material may be possessed except in accordance with any attached condition(s). This is not a permit to apply.	CONDITION(S) ATTACHED <input type="checkbox"/> YES <input type="checkbox"/> NO
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<p>REGISTRATION FEE RECEIVED \$ _____</p> <p><b>AGRICULTURAL COMMISSIONER</b> <b>COUNTY OF RIVERSIDE</b> <b>PO BOX 1089</b> <b>RIVERSIDE, CA 92502-1089</b></p> <p>IMPRINTING COUNTY'S OFFICIAL SEAL</p>					

**\*PLEASE FILL OUT BOTTOM PORTION AS WELL, AS IT WILL BE MAILED BACK TO YOU ATTACHED WITH RIVERSIDE COUNTY OFFICIAL RECEIPT\***

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**TRANSACTION ID# FOR ONLINE PAYMENTS**  
**IF FEES ARE PAID ONLINE, REGISTRATION FORMS ARE STILL REQUIRED TO BE SUBMITTED TO OUR OFFICE.**