



## Pesticide Applicator/Technician Renewal Instructions

You cannot apply pesticides without a valid certification id card. It takes up to 4 to 6 weeks to receive your ID card after your completed application is received.

- **Application Form**
  - Complete the application form and mail it to:  
NYSDEC Pesticide Reporting & Certification Section  
625 Broadway  
Albany NY 12233-7254
- **Renewal Fee**
  - When your application has been determined to be complete an invoice will be mailed to you with payment instructions. Do not submit payment with your application.
  - Certified commercial pesticide applicator and technician recertification fee: \$450 every 3 years for the first category of certification and \$150 every 3 years for each additional category of certification. (1 category = \$450, 2 categories = \$600, 3 categories = \$750, etc)
  - Aquatic antifouling paint applicator fee: \$450 every 3 years.
  - Certified private applicator fee: \$25 every 5 years.
    - Second or subsequent private applicator working on same farm: \$5 every 5 years (please provide name and certification number of primary applicator)
- **Recertification Credits** (not required for technicians)
  - The credit requirements for each category can be found at <https://on.ny.gov/4bdJ5SL>
  - If you have not earned enough credits you can search for approved training course at <https://extapps.dec.ny.gov/nyspad>
  - If you have questions about how many credits you have earned you can call your local NYSDEC regional office, a list of regional office phone numbers is available at <https://on.ny.gov/3vZqWZZ>
  - Training course certificates no longer need to be sent to the DEC with your renewal application, credits are now sent directly to the DEC at the completion of each course.
    - It takes two to three weeks for credits to be received by the DEC after a course is completed, if you completed a course in this time you should wait before submitting your renewal application or send the certificate for that course with your renewal application.
  - **You must complete your renewal and pay your renewal fee no more than 90 days after your card's expiration date or you will be required to submit six penalty credits.**

# Pesticide Applicator/Technician Renewal/Recertification Application Form

COMPLETE ALL FIELDS BELOW, INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED.

Certification Number: \_\_\_\_\_

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ M.I. \_\_\_\_\_

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_

**Home Address** Provide your home street address:

Street \_\_\_\_\_ Apt# \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ County \_\_\_\_\_

Is your **mailing address** the same as your home address? Yes: \_\_\_\_ No: \_\_\_\_ If no, provide your mailing address:

Street/PO Box \_\_\_\_\_ Apt# \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

(\*Your mailing address cannot be your employers address unless you are self-employed)

Daytime phone # : (\_\_\_\_) \_\_\_\_\_ Home Phone # : (\_\_\_\_) \_\_\_\_\_

Cell Phone # : (\_\_\_\_) \_\_\_\_\_ Email: \_\_\_\_\_

## EMPLOYER/BUSINESS INFORMATION

Business Name: \_\_\_\_\_ NYSDEC Registration # (if applicable) \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**Private Applicators Only:** If you are an additional Private Certified Applicator on the same farm or business as other Private Certified Applicators the certification fee may be reduced to \$5.00. To claim this reduced fee, you must provide the Primary Private Applicator's name, certification ID number, and certification expiration date. The Primary Private Applicator must have paid the full \$25.00 fee.

Primary Applicator Name: \_\_\_\_\_ ID Number: \_\_\_\_\_ Exp Date: \_\_\_\_\_

## AFFIRMATION,

1. I acknowledge that I must keep records, file annual reports, submit to inspections, and apply pesticides in adherence to all New York State laws in Article 33 of the Environmental Conservation Law (ECL), and all rules and regulations in 6NYCRR part 325;

2. I authorize DEC and DMV to produce an ID card bearing my DMV photo. I understand DMV will send this card to the address I maintain with DEC; that DEC and DMV will use my DMV photo to manufacture all my subsequent ID Cards for as long as I maintain my applicator certification.

False statements made herein or on any attachments submitted by me, are punishable as a Class A misdemeanor pursuant to Section 210.45 of the Penal Law.

Signature \_\_\_\_\_ Date \_\_\_\_\_