



Pesticides Branch
1428 S. King Street
Honolulu, HI 96814-2512

CODE: _____
FOR OFFICIAL USE ONLY

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 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 Number	
Confidential Statement of Formula (EPA Form No. 8570-4)	<input type="checkbox"/> Is attached	<input type="checkbox"/> Being submitted by basic registrant	
Non-Chemical Pest Control Device Supporting Data Package:	<input type="checkbox"/> Is attached	<input type="checkbox"/> Being submitted by manufacturer	
Microbial Product Permit from Hawaii Department of Agriculture, Plant Quarantine:	<input type="checkbox"/> Is attached	<input type="checkbox"/> Being submitted by manufacturer or dealer	
Firm Name on Label (If differs from Item 1)			
6. Type of Pesticide (Check each applicable item)			
<input type="checkbox"/> Non-Chemical Pest Control Device			
<input type="checkbox"/> Insecticide <input type="checkbox"/> Fungicide <input type="checkbox"/> Herbicide <input type="checkbox"/> Rodenticide <input type="checkbox"/> Nematicide <input type="checkbox"/> Algicide <input type="checkbox"/> Germicide <input type="checkbox"/> Other			
7. Type of Formulation			
<input type="checkbox"/> Microbial			
<input type="checkbox"/> Dust <input type="checkbox"/> Wettable Powder <input type="checkbox"/> Pressurized Product <input type="checkbox"/> Granular <input type="checkbox"/> Emulsifiable Liquid <input type="checkbox"/> Bait <input type="checkbox"/> Other			
8. Type of Containers and Sizes			
9. Signature of Authorized Representative		Type or Print Name	Date

(For State Use Only)	License Period _____
CERTIFICATE OF LICENSE	
When signed under authority of the Chairperson, Board of Agriculture and Biosecurity, this certifies that the pesticide / device named above is duly licensed, license fee paid therefore and its sale in Hawai'i authorized for the license period referred to, pursuant to provisions of the Hawai'i Pesticide Law (Chapter 149A, Hawai'i Revised Statutes) and the Administrative Rules, Chapter 66, Pesticides, Title 4, Department of Agriculture.	

Date Issued	
_____	_____
Receipt No.	Administrator, Division of Plant Industry

SEE FORM P-2a FOR INFORMATION ON FEES, LABELING, AND PROCEDURES