Structural Pest Division Telephone: (404) 656-3641 Fax: (404) 463-6671

INSTRUCTIONS FOR COMPLETING THE COMPANY LICENSE APPLICATION

APPLICANT INFORMATION

This person might be the same person as the certified honey bee control and removal operator.

COMPANY INFORMATION

You may submit more than one company name to be considered. The Commission may reject a name, if it is likely to be confused with a previously issued name (<u>Chapter 620-2-.01 of the Rules of the Georgia Structural Pest Control Act</u>).

LICENSE INFORMATION

This license only allows for operation in the category of Structural Pest Control Honey Bee Removal pursuant to <u>Chapter 620-9 Control and Removal of Honey Bees from Structures</u>. No pesticides can be used under this license. A Certified Honey Bee Control and Removal (HBR) Operator is a person who has satisfied the requirements for certification outlined in Rule 620-9-.02. If you already have a Structural Pest Control Company License in another category, and would like to add HBR, please use the <u>Add a Category Form</u>.

FEE INFORMATION

Fees required are listed on the application. Be sure the amount paid matches the total fee enclosed box and to include a check, certified check, or money order for the correct amount. Applications received without payments will be returned.

Please note that Structural Pest Control Commission licenses, certifications, and registrations operate on a fixed, calendar year basis and expire June 30th of every odd numbered year. The Department is prohibited from prorating fees for mid-cycle applications and from issuing fee refunds. Please apply accordingly.

INSURANCE INFORMATION

The license will not be issued without proof of insurance. The <u>Insurance Form</u> must have the approved company name and meet these minimum requirements: Bodily Injury – Any One Occurrence \$50,000, Property Damage – Any One Occurrence \$50,000, and Minimum Annual Aggregate \$200,000. An authorized representative must complete the form, and it can be mailed or emailed (<u>insurance@agr.georgia.gov</u>) to the Structural Pest Division Office.

APPLICANT AND CERTIFIED HONEY BEE CONTROL REMOVAL OPERATOR

All applicable individuals must sign the application. Unsigned applications will be returned.

Applications received by the 1st day of the month will be considered by the Commission at their monthly meeting.

Georgia Department of Agriculture Structural Pest Division

Structural Pest Division 244 Washington St SW, Room G007 Atlanta, Georgia 30334-4201

HONEY BEE REMOVAL STRUCTURAL COMPANY LICENSE APPLICATION					Official Use Only Check #	
					Amount	\$
APPLICANT INFORMATION						
Applicant's Name						
COMPANY INFORMATION						
Company Name				County		
Company Name (2 nd Choice)			Company Name (3 rd Cl	noice)		
Street Address			Mailing Address (if di	fferent from street	t Address)	
City	State Zip		City		State	Zip
Telephone Number			Fax Number			
Website			Email			
LICENSE INFORMATION						
License category	Honey Bee Control and Removal					
Certified Honey Bee Control and Removal Operator	Name				Certification #	
Type of License	Company License					
FEES SUBMITTED (Can be paid by Certified Check or Money Order)						
\$100.00 Company License Fee	\$70.00 Research Fee				Total Fee enclosed	\$170.00
INSURANCE INFORMATION						
The license can not be issued without proof of insurance.					Attached	Submitted separately
APPLICANT AND CERTIFIED HONEY BEE CONTROL AND REMOVAL OPERATOR						
I hereby certify that the information given in this application is true and correct.						
Signature of Applicant		Date				
Signature of Certified Honey Bee Control Removal Operator		Date			Certification #	
FOR OFFICIAL USE ONLY						
Signature of Chairman of Structural Pest Control Commission		Date				