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New Mexico Department of Agriculture  
Pesticide License Application  
**OPERATOR/TECHNICIAN/AG PILOT**

**LICENSE APPLICANT** Name \_\_\_\_\_

Social Security No. \_\_\_\_\_

Are you currently licensed in New Mexico? If so please provide your license no.: \_\_\_\_\_

What part(s) of the state will you be working in? \_\_\_\_\_

Home Address \_\_\_\_\_ Home Phone \_\_\_\_\_

**SUPERVISING COMMERCIAL APPLICATOR** Name \_\_\_\_\_

Lic. No. \_\_\_\_\_ Business Name \_\_\_\_\_

Business Phone(s) \_\_\_\_\_

Email \_\_\_\_\_

You may request a one-time Technician Training Permit for new employees. Remember that a licensed person with at least 6 months' experience must be present during any pesticide applications made by the permittee. Please indicate desired start and end dates (**maximum 60 calendar days**).

Training Permit start date: \_\_\_\_\_ Ends (start date plus 60 days): \_\_\_\_\_

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**If Applicable**

**Termite Service Technicians:** This category-specific license is required before an operator may perform any 7D pesticide applications or inspections. To apply, include a copy of your certificate from approved 7D training and provide workshop ID number(s) here: \_\_\_\_\_

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**The information provided here is true and correct to the best of my knowledge. It is a violation of the NM Pesticide Control Act to provide false information on any license application. Both applicant and supervisor must sign.**

\_\_\_\_\_  
License Applicant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Supervising Commercial Applicator

\_\_\_\_\_  
Date

**NMDA USE ONLY**

General Exam  
Date

Score

Operator Exam  
Date

Score

7D Exam, if applicable  
Date

Score

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NMDA Use Check# \_\_\_\_\_ \$ \_\_\_\_\_ Lic.# \_\_\_\_\_