



PRIVATE APPLICATOR RENEWAL APPLICATION License Number (Required)

License Period: April 1, 2018 thru March 31, 2021

Grid for License Number (Required)

PART A - APPLICANT'S LEGAL NAME, MAILING ADDRESS, & SIGNATURE (Please Print)

Form fields for Person Legal First Name, MI, Person Last Name, Last 4 SSN, Person Address, City, State, Zip, County, and Phone.

PART B - PAYMENT METHOD

Payment made by check is payable to the Ohio Department of Agriculture and must be mailed. This application may be faxed or mailed provided it is ONLY a credit card payment. This application and fee are only valid for the licensing period listed above. Failure to become a licensed private applicator during the application period will VOID the application. License fees are not refundable for any reason. Exams taken are valid for one year from date taken.

License fee: \$30.00

Payment method: Check/Money Order #, Discover, Visa, MasterCard

The following information is required before a credit card payment can be processed.

Form fields for Person name on credit card, Credit Card Number, CVV, Expiration Date (MM/YY), and Valid Signature.

APPLICANT SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_