

SGH Grant Application for Pesticide Contractor License

This Application should be completed at the beginning or during training for the License and submitted to the SGH Board of Directors. The Board will review the Application and notify the Applicant concerning his/her eligibility for the Grant.

The Applicant must complete the State-required coursework and exam as defined in the SGH Grant Agreement and obtain a Commercial Pesticide Applicator's License within six (6) months from the date of the Application. Within an additional sixty (60) days, the Applicant must present the following to the SGH Board of Directors: proof of the State-required liability insurance, a Pesticide Contractor License, and county business license (if the applicant is the business owner).

Your Name: _____ Date: _____

Mailing Address: _____

Email Address: _____

Home Phone: _____ Cell Phone: _____

County in which your business is or will be located: _____

Counties your business will serve: _____

Related licenses or certifications you already have: _____

Related degree or training: _____

Related experience: _____

Category or categories of license you plan to get: Category 23 Forest Pest Control
 Category 24 Ornamental and Turf Pest Control

Date you began or plan to begin training: _____

Date you completed or plan to complete licensing requirements: _____

By signing below, you agree to comply with the terms of the SGH Grant Agreement.

_____ **Print** _____ **Sign**

Please submit your application to: Board of Save Georgia's Hemlocks, 37 Woody Bend, Dahlonega, GA 30533.

Date received by Board: _____

Approved by:	Name	Date	Name	Date
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____