Structural Pest Division

244 Washington St SW, Room G007 Atlanta, Georgia 30334-4201 Phone: (404) 656-3641

## **EMPLOYEE REGISTRATION CARD APPLICATION**

This application can be used to apply for an initial employee registration card, a replacement card, or to transfer a registration to a new employer/company. Employee registration cards may also be requested online. For instructions on using the online portal to request an employee registration card, please view the <a href="Employee Registration Online Guide">Employee Registration Online Guide</a>. This application must include the Designated Certified Operator(DCO) signature and indicate employee operational categories along with a \$10.00 registration fee paid by check or money order made payable to the Georgia Department of Agriculture.

Name:		DOB:			
Address:					
Phone Number:					
Email Address:					
Currently Registered: Yes*	No				
*If Yes:					
Employee Registration Number:		Company	License Numbe	r:	
Employer/Company:					
<b>Verific</b> To be completed		E <b>mployme</b> nated Cert			
I verify that the above identified employee has chapter 620-302 of the Rules of the Georgia Str	met all i	requiremer	nts of employee	registration as	required by
DCO Signature:			Date:		
Print Name:			Certification Nu	ımber:	
Check category(ies) in which employee operate	es:	WDO	HPC	FUM	
Mail application and fee for the Employee Regi be paid by check or money order.	istration	card to the	e following addr	ess. The \$10.00	) fee can

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