VENTURA COUNTY AGRICULTURAL COMMISSIONER STRUCTURAL PEST CONTROL BUSINESS/QUALIFYING MANAGER REGISTRATION BRANCH 2 & 3

Date Submitted:		For Year:					
COMPANY INFORMATION: Performin Company Name:		Branch 2 &/or					
Mailing Address:							
			**************************************			•	
Telephone: () Fax: (
Physical Address:							
(If different than above)							
OPR:(Print Name of Operator)	LIC:	Exp:			Branch 2		Branch 3
SUPERVISION : Qualifying Manager (QMQM:					rson] Branch 2	г	Branch 3
(Print Name)							
BS:(Print Name)	LIC:	Exp:		L	Branch 2	U	Branch 3
ADDITIONAL LOCATIONS							
Branch Office (list all) performing work Branch Address:			Registration	No:			
						Zip:	
Telephone: () Fax: ()	Y	_ Working in:		Branch 2		Branch 3
QM:	_ Lic:	Exp:			Branch 2	П	Branch 3
(Print Name) BS:				П	Branch 2	П	Branch 3
(Print Name)					Didner 2	<u> </u>	braner 5
Branch Office							
Branch Address:			_ Registration	No:		7in:	
Telephone: () Fax: (1		Working in:				
QM:(Print Name)	_ Lic:	Exp:			Branch 2	Ц	Branch 3
	_ Lic:	Exp:		Ц	Branch 2	Ц	Branch 3
(Finit Maine)							
REGISTRATION INFORMATION/FE	ES:						
Total Fees Submitted: \$		Make ch	eck payable to	: CC	OUNTY C)F VEN	TURA
Print Name:					Date:		
.					Title:		
Signature: I certify that the informati							

requires each licensed Branch 2 and Branch 3 structural pest control operator qualifying and (SPCB) registered company to register with the commissioner prior to operating a structural pest control business in the county. The registration shall cover a calendar year. A fee may also be required at the time of registration. The fee shall be set by the county Board of Supervisors, except in no case shall the fee exceed the actual cost of processing the registration or ten dollars (\$10) whichever is less. Registrations may be amended to add or change operator qualifying manager and/or branch location(s) during the year for a fee not to exceed ten dollars (\$10).

For Office Use:	
Date received:	