



**Privacy Notice**

Under the authority of the *Environmental Protection Act SNL 2002 cE-14.2*, personal information will be collected for the purpose of enforcing the *Pesticides Control Regulations 2012*. This allows the **Department of Municipal Affairs and Environment** to disclose personal information to other Federal and Provincial Departments and Agencies.

**Notice: Please be advised that, in accordance with Government's Proactive Disclosure Initiative, your licence will be posted online subject to any exceptions to disclosure provided under the *Access to Information and Protection of Privacy Act, 2015*.**

**APPLICATION FOR A PESTICIDE VENDOR LICENCE  
UNDER THE *ENVIRONMENTAL PROTECTION ACT SNL 2002 cE-14.2***

1. Name of Applicant: \_\_\_\_\_

2. Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

3. Contact Info: \_\_\_\_\_

Email Address: \_\_\_\_\_

4. Has a Vendor Licence been held previously in this province? YES  NO

\*If YES, Vendors Licence Number held previously was: \_\_\_\_\_

6. Nature of business: Retail:  Wholesale:  Both:

7. Name, address, and telephone number of person(s) who holds a Certified Pesticide Vendor Licence with your company:

Certified Pesticide Vendor Licence Number: \_\_\_\_\_

Name: \_\_\_\_\_

Address (If different than Question 2):

\_\_\_\_\_

\_\_\_\_\_



WDG = Water Dispersible Granules; WP = Wettable Powders;  
WS = Water Soluble Concentrat

9. A fee of \$ 375.00 in the form of a cheque or money order must be submitted with this application. Please make the cheque or money order payable to the **Newfoundland Exchequer Account** and write **Revenue Account No. 1760-500-57L0-2764** on the cheque or money order to facilitate processing. A receipt from Central Cashier indicating that payment has been received will also be accepted. Cash payments **will not** be accepted.

I hereby certify that the information provided in this application is accurate, to the best of my knowledge.

Signature: \_\_\_\_\_ Position Title: \_\_\_\_\_

Date: \_\_\_\_\_

This application including any copies of Certificates or Certified Vendor Licences must be submitted to:

**Pesticide Enforcement and Licensing Specialist**  
**Personal & Confidential**  
**Department of Municipal Affairs and Environment**  
**Pesticides Control Section**  
**P.O. Box 8700**  
**St. John's, NL**  
**A1B 4J6**