

**APPLICATION FOR A LICENCE AS A PROVISIONAL PEST CONTROL OPERATOR**

The Chief Poisons Inspector  
Department of Health and Families  
PO Box 40596  
CASUARINA NT 0811

I hereby apply for a licence to be a Provisional Pest Control Operator under the *Poisons and Dangerous Drugs Act* and in support of my application I submit the following information:

FULL NAME	DATE OF BIRTH
OCCUPATION	
PROFESSIONAL QUALIFICATIONS	
STATE NAME OF PERSON OR COMPANY BY WHOM EMPLOYED	
NATURE OF BUSINESS	
NAME OF BUSINESS	
BUSINESS ADDRESS (if more than one premises, show all addresses)	
TELEPHONE	
POSTAL ADDRESS	
HOME ADDRESS	
TELEPHONE	
State reason for application	

State specifically the name of each unscheduled, Schedule 5 and Schedule 6 pesticide for which a provisional licence is required )and state the proposed purpose of each:

**Note: A trainee pest control operator shall not use any Schedule 7 pesticides (eg arsenic) except under the direct and personal supervision of a fully licensed pest control operator**

State full details of training and experience in pest control procedures and handling of poisons

State length of period of residence in the Northern Territory

If less than 5 years, state previous place or places of residence

I understand that the holder of a Provisional Pest Control Operator's licence must comply with the provisions of the *Poisons and Dangerous Drugs Act* and the Code of Practice for the Handling of Pesticides and is responsible for the personal supervision and control of all poisons in his/her possession

SIGNATURE OF APPLICANT

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**TO BE COMPLETED BY FULLY LICENSED PEST CONTROL OPERATOR EMPLOYER**

NAME OF EMPLOYING PEST CONTROL OPERATOR

LICENCE NUMBER

EXPIRY DATE

NAME OF COMPANY

TELEPHONE

BUSINESS ADDRESS

**DECLARATION**

I undertake to ensure that the holder of a provisional pest control operator's licence while employed by me:

- (a) shall not use any pesticide other than those listed in his/her provisional Licence;
- (b) shall use those pesticides only under the direction of a fully licensed pest control operator;
- (c) shall not carry out a pest control operation unless it is in accordance with the Northern Territory "Code of Practice for the Handling of Pesticides".

SIGNATURE OF EMPLOYER

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