



# COUNTY OF SAN MATEO

## PEST CONTROL ADVISER REGISTRATION

Registration for \_\_\_\_\_ County for 20\_\_

Name of Adviser's Employer: \_\_\_\_\_

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

Written Recommendations are available at: \_\_\_\_\_

(if different than above address) \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Fax #: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Agricultural Pest Control Adviser: (Please provide a photocopy of your license.)

Print Name: \_\_\_\_\_ Date: \_\_\_\_\_

License Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Signature: \_\_\_\_\_

**In order for your registration to be processed, you must include the following:**

- Completed County Registration Form
- A copy of your PCA license
- Fee – Checks payable to **San Mateo County**  
\$10 for San Mateo based PCA  
\$5 for Out of County based PCA

If registering by mail - send to:  
San Mateo County Department of Agriculture  
PO Box 999  
728 Heller Street  
Redwood City, CA 94064-0999

FOR COUNTY USE

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

Fee Received: \_\_\_\_\_

Check #: \_\_\_\_\_

Receipt #: \_\_\_\_\_

Agricultural Commissioner's Signature:

\_\_\_\_\_