

United States Environmental Protection Agency Washington, D.C. 20460

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Request for Pesticide Applicator Certification in Indian Country				
LAST NAME (+ Jr, Sr, II, III etc.)		FIRST NAME	MI	
MAILING ADDRESS				
CITY STATE ZIP				
AREA CODE TELEPHONE COUNTY OFFICE USE				
()				
EMAIL ADDRESS (optional)				
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2. BIRTH DATE: M M M D		AL APPLICATOR ID # (if renewal):		
4. CERTIFICATION TYPE:				
5. APPLICATOR TYPE: Commercial Applicator Private Applicator				
6. CERTIFICATION METHOD:				
a. Requesting federal certificate based on valid federal, state or tribal certificate or license. (Attach a copy of certificate.)				
State (if applicable): Applicator Number:				
Expiration Date: M M - D D - Y Y				
Applicator Category/Categories for which Certificate/License was Received (enter category code(s)):				
b. Completion of training (ONLY for private applicators who do not have a valid federal, state or tribal certificate or license)				
By signing this application below and submitting to U.S. EPA, I hereby attest to the fact that:				
 I have personally completed the required training. I understand and can apply the information therein. 				
 I understand and can apply the information therein. I understand the significance of labeling and understand my legal responsibilities for the use of pesticides in accordance with label instructions and warnings; 				
4. and; I intend to purchase and use Restricted Use pesticides only for production of an agricultural commodity on property owned or rented by myself or my				
employer or to other property if the application is made without compensation other than trading of personal services between producers of agricultural commodities.				
7. PLEASE SIGN HERE				
I attest my certification has not been suspended or revoked in the last 4 years by any state, tribe, or territory. If it has been, please check this box and attach an explanation.				
A false statement in this certification may be grounds for denial of certification and may be punishable by fine or imprisonment (U.S. Code, Title 18, Section 1001). I certify that all the statements that I have made on this form are true, complete and correct to the best of my knowledge and belief, and are made in good faith.				
SIGNATURE: DATE SIGNED:				
(FOR OFFICE USE:)				
REC: AP	PP:	INIT:	SENT:	

INSTRUCTIONS FOR COMPLETING EPA FORM 8500-17

This form is to be used to request certification to purchase and apply Restricted Use Pesticides in Indian Country from the U.S. Environmental Protection Agency.

- 1. Fill out all of the information. An email address is requested but is not required. Phone number listed should be one at which you can be reached during business hours. The address should be your business address, if applicable, for commercial applicators since this information will be posted to EPA's website.
- 2. Enter your birth date using the numerical month-month-date-date-year-year format.
- 3. Enter your EPA Federal Applicator Identification number if this is a renewal or request for a replacement card.
- 4. Certificate Type: Check appropriate box. If this is your first application for a pesticide applicator certification in Indian Country, check "Initial Certificate".
- 5. Applicator Type: Check "Private Applicator" ONLY if you will be or are <u>applying pesticides for production of an agricultural commodity on property owned or rented by you or your employer</u>. All other applicators check "Commercial Applicator". There is no "noncommercial" or "public" federal applicator type.
- 6. Certification Method: In most cases you will check "Requesting federal certificate based on valid federal, state or tribal certificate or license".
- 6a. Enter the two character state for which you hold a valid certificate/license, if applicable, the applicator number for your existing certificate, and expiration date. Enter the code for the category or categories for which you are currently certified/licensed. Attach a photocopy of both sides of your current and valid federal, state or tribal certification or license. The underlying certificate needs to come from a state or tribe that shares a contiguous boundary with the area of Indian country in which you intend to apply RUPs.
- 6b. If you do not hold a valid federal, state or tribal applicator certificate and you are applying to be a private applicator, you may be certified after submitting documentation of completion of the equivalent of 40 hours of classroom or workshop training, 40 hours of coursework, or accumulation of 40 continuing education units (CEUs) of pesticide applicator training or equivalent material. The documents showing completion of training submitted with this application must be from state-approved training courses. At least 10 hours of the CEUs, coursework or training must include the general standards of competency outlined in 40 CFR 171.5 and 40 CFR 171.6. Courses that cover the material outlined in 40 CFR 171.4(b) are also appropriate because they overlap with the material covered in 40 CFR 171.5 and 40 CFR 171.6. Training must be completed within the two years prior to certification. These topics are typically covered in state prelicense courses and by cooperative state extension service sponsored training. Any CEUs, coursework or training not specifically covering the general standards for competency must be in the agricultural plant or animal categories or related to agricultural production. If you have questions about what courses are applicable, please contact the appropriate Regional office (see addresses on page 3). To determine the appropriate Regional office, see http://www.epa.gov/epahome/whereyoulive.htm . Include documentation of completion of the required training course(s).

To apply for recertification, you must complete 6 CEUs of pesticide applicator training or equivalent material during the four-year certification period, with 3 CEUs occurring in the year preceding recertification. Any CEUs, coursework or training not specifically covering the general standards for competency must be in the agricultural plant or animal categories or related to agricultural production. The documents showing completion of training submitted with the recertification form must be from state-approved training courses.

7. Sign and date the application and mail the application with a photocopy of both sides of your existing federal, state, or tribal pesticide applicator certificate/license (if you are requesting certification based on a federal, state, or tribal certification) to the appropriate Regional office (see addresses on pages 2 and 3). To determine the appropriate Regional office, see http://www.epa.gov/epahome/whereyoulive.htm

Paperwork Reduction Act Notice: The public reporting burden for respondents completing this form is estimated to average about 10 minutes per response. Send comments (referencing OMB Control Number 2070-0029 and EPA Form 8500-17) about the burden estimate or any other aspect of this collection of information, including suggestions for reducing the burden to: Director, Collection Strategies Division (2822T), U.S. Environmental Protection Agency, 1200 Pennsylvania Ave., N.W., Washington, D.C. 20460. Do not send your completed application form to this address.

Privacy Act Statement: Title 7 United States Code, section 136i(a)(1) authorizes the collection of this information. The primary use of this information is to identify persons certified by EPA under the Agency's federal certification plan which administers and oversees certification of applicators of restricted use pesticides. Disclosures of this information may be made pursuant to published routine uses, including to appropriate agencies for law enforcement purposes and to an EPA website for information purposes. Providing the requested information is voluntary, but failing to do so may result in EPA's inability to approve your request to become, or maintain your status as, a certified applicator of restricted use pesticides. For a full description of this system notice, including routine uses, see [insert FR Notice citation upon publication].

Addresses for Submitting Form

Addresses for Submitting Form Region Address			
Region			
1	Federal Plan Coordinator		
	Toxics and Pesticide Unit		
	Pesticides Program (OES05-4)		
	U.S. EPA - New England, Region 1		
	5 Post Office Sq, Suite 100		
	Boston, MA 02109-3912		
2	U.S. Environmental Protection Agency, Region 2		
	Pesticides Team		
	Attn: Pesticide Certification Training Coordinator		
	2890 Woodbridge Avenue		
	MS-500		
	Edison, New Jersey 08837		
3	No Federally Recognized Tribes		
4	Federal Tribal Plan Coordinator		
	USEPA Region 4 - Pesticides Section		
	61 Forsyth Street SW		
	SNAFC - 12th Floor		
	Atlanta, GA 30303		
5	U.S. EPA		
	Land and Chemicals Division, CMB		
	77 W. Jackson Blvd. LC-8J		
	Chicago, IL 60604		
6	U.S. Environmental Protection Agency		
	1445 Ross Avenue, Suite 1200		
	Pesticides Section (6PD-P)		
	Dallas, Texas 75202-2722		
	Pesticide Applicator Certification Coordinator		
	U.S. Environmental Protection Agency - Region 7		
7	WWPD/TOPE/PEST		
	901 N. 5th St		
	Kansas City, KS 66101		
8	US EPA, Region 8		
	Attn: Region 8 Certification		
	1595 Wynkoop St, 8P-P3T		
	Denver, CO 80202		
9	Federal Plan Coordinator		
	Pesticides Office (CED-5)		
	U.S. EPA Region IX		
	75 Hawthorne St.		
	San Francisco, CA 94105-3901		
10	Federal Pesticide Applicator Certification Program		
	Pesticides & Toxics Unit		
	US EPA, Region 10		
	1200 Sixth Ave, Ste. 900, OCE-084		
	Seattle, WA 98101		