Attachment A

INSTRUCTIONS FOR COMPLETING:
Modification Request: Restricted Use Pesticide Applicator Certification Plan

This form is to be used by Certifying Authorities (States, Territories, Tribes, and Federal Agencies) to request EPA's review of modifications to their EPA approved certification plan for the certification of restricted use pesticide applicators.

When submitting a Notification Form, the certifying authority must attach a proposed implementation timeline, the sections of the certification plan being changed, and any relevant attachments that are being changed in order for the Agency to review and make a determination on the certification plan modifications.

For all submissions, the certifying authority should complete boxes 1 through 6 and box 22:

- For Box 1, insert the number that corresponds to your EPA Region;
- For Box 2, insert the name of the certifying authority;
- For Box 3, insert the submission date of this Notification Form;
- For Box 4-6, insert the point of contact's name and contact information for the certifying authority;
- For Box 22, the certifying authority must confirm that the changes to not impair any part of 40 CFR Part 171 or any other Federal laws or regulations by checking the box.

For Substantial Modifications, the certifying authority should complete boxes 7 through 12:

- For Box 7, select each section of the plan that is being affected by the proposed modification;
- For Box 8, identify the federal rule that corresponds to the Substantial Modification;
- For Box 9, identify the certifying authority's rules that correspond to the Substantial Modification;
- For Box 10, provide a brief description of the Substantial Modification;
- For Box 11, include a proposed implementation timeline for the Substantial Modification;
- For Box 12, insert a proposed date for the Substantial Modification to be implemented.

For Notable Modifications, the certifying authority should complete boxes 13 through 18:

- For Box 13, select each section of the plan that is being affected by the Notable Modifications;
- For Box 14, identify the federal rule that corresponds to the Notable Modification;
- For Box 15, identify the certifying authority's rules that correspond to the Notable Modification;
- For Box 16, provide a brief description of the Notable Modification;
- For Box 17, include a proposed implementation timeline for the Notable Modification;
- For Box 18, include the date for the Notable Modification to be implemented.

For Incidental Changes, the certifying authority should complete boxes 19 and 20:

- For Box 19, indicate each section of the plan that is being affected by the Incidental Change;
- For Box 20, provide a brief description of what the Incidental Change is.

Box 21 is an optional box where the certifying authority may include additional comments that the certifying authority wishes to let the Agency know as part of its review and consideration.

PAPERWORK REDUCTION ACT NOTICE

Paperwork Reduction Act Notice: This collection of information is approved by OMB under the Paperwork Reduction Act, 44 U.S.C. 3501 et seq. (OMB Control No. 2070-0029). Responses to this collection of information are mandatory for certain persons, as specified at 40 CFR Part 171. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. The public reporting and record keeping burden for this collection of information is estimated to be 30 minutes per response. Send comments on the Agency's need for this information, the accuracy of the provided burden estimates and any suggested methods for minimizing respondent burden to the Deputy Director, Data & Enterprise Programs Division, U.S. Environmental Protection Agency (2821T), 1200 Pennsylvania Ave., NW, Washington, D.C. 20460. Include the OMB control number in any correspondence. Do not send the completed form to this address.

OMB Control No. 2070-0029. Expiration: 8/31/2026

Please read instructions before completing form.

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

Modification Request: Restricted Use Pesticide Applicator Certification Plan

1. EPA REGION | 2. STATE LEAD AGENCY/TRIBE/TERRITORY | 3. DATE SUBMITTED

4. PLAN CONTACT NAME | 5. TELEPHONE | 6. EMAIL ADDRESS

MODIFICATIONS

- ***For Substantial Modifications Proceed to #7.***
- ***For Notable Modifications Proceed to #13.***
- ***For Incidental Changes Proceed to #19.***

SUBSTANTIAL MODIFICATIONS

7. SECTION(S) OF PLAN AFFECTED

1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐ 9 ☐ 10 ☐ 11 ☐ 12 ☐ 13 ☐

8. CORRESPONDING FEDERAL RULE(S) SECTION(S) 9. CORRESPONDING STATE/TRIBE/TERRITORY RULE(S)

40 C.F.R. Part 171 .

40 C.F.R. Part 171 .

40 C.F.R. Part 171 .

10. DESCRIBE THE MODIFICATIONS REQUESTED

11. ATTACH PROPOSED IMPLEMENTATION TIMELINE FOR SUBSTANTIAL MODIFICATIONS AT #21

12. DATE SUBSTANTIAL MODIFICATIONS WILL BE IMPLEMENTED

NOTABLE MODIFICATIONS

13. SECTION(S) OF PLAN AFFECTED

1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐ 9 ☐ 10 ☐ 11 ☐ 12 ☐ 13 ☐

14. CORRESPONDING FEDERAL RULE(S) SECTION(S) 15. CORRESPONDING STATE/TRIBE/TERRITORY RULE(S)

40 C.F.R. Part 171 .

40 C.F.R. Part 171 .

40 C.F.R. Part 171 .

16. DESCRIBE THE MODIFICATIONS REQUESTED

17. ATTACH PROPOSED IMPLEMENTATION TIMELINE FOR THE REQUESTED MODIFICATIONS AT #21.

18. DATE NOTABLE MODIFICATIONS WILL BE IMPLEMENTED

INCIDENTAL CHANGES

19. SECTION(S) OF PLAN AFFECTED

1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐ 9 ☐ 10 ☐ 11 ☐ 12 ☐ 13 ☐

20. DESCRIBE THE MODIFICATIONS REQUESTED

21. ADDITIONAL STATE LEAD AGENCY/TRIBE/TERRITORY COMMENTS FOR EPA REVIEW

22. DETERMINATION OF COMPLIANCE STATEMENT

☐ By checking this box, I confirm that the proposed modifications to the restricted use pesticide applicator certification plan do not impair the plan's compliance with the requirements of 40 C.F.R. Part 171 or any other Federal laws or regulations.

23. SIGN

REQUIRED ATTACHMENTS FOR ALL CHANGE REQUESTS

Implementation Timeline Revised
Certification Plan
All Associated Plan Attachments