GOVERNMENT AGENCY REGISTRATION FORM

1. AGENCY INFORMATION: Provide the following information for the agency.
   FEIN: ______________________________  GA Registration No. ________________
   Agency Name: _____________________________  Address: _____________________________
   City: _____________________________ State: ________ Zip: ________ County: ________________
   Phone: _____________________________ Email: _____________________________

2. CONTACT INFORMATION:
   Name: _____________________________
   Phone: _____________________________ Email: _____________________________

3. APPLICATORS: Kansas certified commercial pesticide applicator(s) and Kansas uncertified pesticide applicator(s): government employees who apply restricted use pesticides (RUP) are required by statute to either be certified in the appropriate commercial pesticide applicator certification category(s) and subcategory(s) or be working under the supervision of a certified commercial applicator. Provide the following information for all pesticide applicators who will be applying pesticides under this registration. Ensure correct birth date is provided for each applicator. Attach separate sheet, if necessary. Staff code will be UA for uncertified applicator or CA for certified applicator.

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<th>HIRE DATE</th>
<th>STAFF CODE</th>
<th>COMMERCIAL CERT. NO.</th>
<th>NAME</th>
<th>DATE OF BIRTH</th>
<th>ADDRESS</th>
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4. Signature ___________________________________________ Date __________________________
   Printed Name ___________________________________________ Title __________________________

5. SUBMIT: Completed application and registration fee to Kansas Department of Agriculture, Pesticide and Fertilizer, 1320 Research Park Drive, Manhattan, KS 66502. **Registration fee is $50.00.** No fee is required of any township located within a county which has previously applied for and received Government Agency Registration for the same calendar year this application covers.

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Fee | Code | Transaction No. | CK | ACH | MO
---|------|----------------|----|-----|-----
$50 | GAR  |                |    |     |     

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DO NOT WRITE IN THIS BOX (For Kansas Department of Agriculture use only)