

**PEST CONTROL AIRCRAFT  
PILOT COUNTY REGISTRATION**

STATE OF CALIFORNIA  
DEPARTMENT OF PESTICIDE REGULATION  
PEST MANAGEMENT AND LICENSING BRANCH

Registration Expiration Date: December 31, \_\_\_\_\_

For Registration in County of Placer

Name:

Address:

City:

Zip:

Phone Number:

Employer:

Email:

Address:

City:

Zip:

Phone Number:

If Apprentice Pilot: Name(s) of Journeyman Pilot(s) Registered in County Providing Supervision

Place A Copy of Current JPC, APC, or VCT License Below  
or Include Attachment

**Pilot's Signature:**

**Date:**

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Additional Information/Comments

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Please remit to:  
**PLACER COUNTY DEPARTMENT OF  
AGRICULTURE  
11477 E AVENUE  
AUBURN CA 95603**  
  
(530) 889-7372  
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For County Use Only

Reg. Fee Rec'd \$ \_\_\_\_\_ Receipt # \_\_\_\_\_

Cash \_\_\_\_\_ Check # \_\_\_\_\_

Online Payment: \_\_\_\_\_ Clerk: \_\_\_\_\_

**Agricultural Commissioner's Signature By:** **Date:**

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