LOUISIANA DEPARTMENT of AGRICULTURE & FORESTRY

APPLICATION FOR STRUCTURAL PEST CONTROL LICENSE PACKET

Instructions: Please complete the entire packet and submit all supporting documentation with application. Department staff will review all applications within 30 days of receipt. If further review is needed, the application will be sent to the commission for review at the next quarterly commission meeting. Each applicant will be notified in writing of the application status and next steps.

REQUIREMENTS FOR LICENSE TO ENGAGE IN STRUCTURAL PEST CONTROL WORK:

Each applicant for license shall possess one of the following qualifications for each phase(s) he/she wishes to take the examination:

- **General Pest Control, Commercial Vertebrate Control, and Commodity Fumigation**
  - A degree from an accredited four-year college or university with a major in entomology; or
  - A degree from an accredited four-year college or university with at least 12 semester hours or the equivalent in quarter hours of course work in entomology **and** at least one year of experience within the last ten years as a registered technician under the supervision of a licensee in the license phase for which the applicant desires to take the examination; or
  - Four years of experience within the last ten years as a registered technician working under the supervision of a licensee in the license phase for which the applicant desires to take the examination; or
  - Four years of experience within the last ten years as a technician under the supervision of a structural pest control operator in another state in the license phase for which the individual desires to take the examinations. Experience with an out-of-state structural pest control operator shall be substantiated by evidence acceptable to the commission.
- **Termite Control**
  - Applicant must possess one of the above listed qualifications **plus** completion of a commission approved comprehensive termite program.
    - If you have completed a CACTP course, please attach a copy of the certificate to the application.
- **Structural Fumigation**
  - A degree from an accredited four-year college or university with a major in entomology **and** having completed 30 jobs in structural fumigation within the last ten years, as a registered technician under the supervision of a licensee in structural fumigation; or
  - A degree from an accredited four-year college or university with at least 12 semester hours or the equivalent in quarter hours of course work in entomology **and** at least one year of experience within the last ten years, having completed 30 jobs in structural fumigation as a registered technician under the supervision of a licensee in structural fumigation: or
  - Four years of experience within the last ten years, having completed 30 jobs in structural fumigation as a registered technician working under the supervision of a licensee in structural fumigation; or

    - Four years of experience within the last ten years, having completed 30 jobs in structural fumigation as a technician under the supervision of a structural pest control operator in another state in the license phase for which the individual desires to take the examinations. Experience with an out-of-state structural pest control operator shall be substantiated by evidence acceptable to the commission.
- **Ship Fumigation**
    - A degree from an accredited four-year college or university with a major in entomology and having completes 200 jobs in ship fumigation working under the supervision of a licensee in ship fumigation; or
    - A degree from an accredited four-year college or university with at least 12 semester hours or the equivalent in quarter hours of course work in entomology and at least one year of experience within the last ten years, having completed 200 jobs in ship fumigation as a registered technician under the supervision of a licensee in ship fumigation; or
    - Experience as registered technician having completed 200 jobs in ship fumigation, working under the supervision of a licensee in ship fumigation, during a two-year period within the last ten years; or
    - Four years of experience within the last ten years, having completed 200 jobs in ship fumigation as a technician under the supervision of a structural pest control operator in another state in ship fumigation. Experience with an out-of-state structural pest control operator shall be substantiated by evidence acceptable to the commission.

ADDITIONAL INFORMATION

- If you are using your education to qualify, an official copy of your college transcript must be submitted with the application.
- If using experience from other states, documentation of certification/license from that state must be provided with application.
    - Recommended documentation includes letter from regulatory agency verifying complete experience; copies of license/certification cards from the last 4 years.
- If you are unable to obtain a completed affidavit from your supervising licensee, you will need to provide a notarized statement signed by the applicant that the licensee who provided supervision is deceased, his whereabouts are unknown, or fails or refuses to supply the statement, affidavit, or both.
- If approved for testing, exams are offered Tuesdays and Thursdays (excluding holidays and office closures) in the Baton Rouge main office at 8:30 a.m. and 1:30 p.m.
- Please check the calendar on the department website for all upcoming SPCC meetings at ldaf.la.gov.

CONTACT INFORMATION

Phone: 225-952-4578
Email: spc@ldaf.state.la.us

LOUISIANA DEPARTMENT of AGRICULTURE & FORESTRY
MIKE STRAIN, DVM *Commissioner*

STRUCTURAL PEST CONTROL COMMISSION
5825 Florida Boulevard, Suite 3003
Baton Rouge, LA 70806
(225) 925-4578 / spc@ldaf.state.la.us

APPLICATION FOR STRUCTURAL PEST CONTROL LICENSE

APPLICANT INFORMATION

Name: _____ ID Number: _____
Social Security Number: _____ Date of Birth: _____
Mailing Address: _____ City: _____ State: _____ Zip Code: _____
Home Phone Number: _____ Cell Phone Number: _____
Email Address: _____

Please select the license phase(s) for which you are applying for license:

- ☐ General Pest Control
- ☐ Commercial Vertebrate Control
- ☐ Termite Control
- ☐ Commodity Fumigation
- ☐ Structural Fumigation
- ☐ Ship Fumigation

EDUCATION

(If qualifying through education, please attach an official copy of your college transcript.)
College or University Name: _____ Years of College: _____
Major: _____ Minor: _____

WORK EXPERIENCE

Employer: _____ Categories Operated In: _____
Employment Dates (MM/DD/YYYY): Start: _____ End: _____
Address: _____ Supervisor Name: _____
Employer: _____ Categories Operated In: _____
Employment Dates (MM/DD/YYYY): Start: _____ End: _____
Address: _____ Supervisor Name: _____

NOTARY PUBLIC

Sworn to and subscribed before me on this _____ day of _____, 20 _____ .

Signature of Applicant: _____ Date: _____
Notary Public Seal:

Please submit original forms to:
Louisiana Department of Agriculture and Forestry
5825 Florida Blvd., Suite 3003, Baton Rouge, LA 70806

Office Use Only:
Department Staff Approval: ☐ Approved ☐ Disapproved

Disapproval Reason:

_____ _____ _____ _____
Assistant Director Date Director Date

Referred to Commission for Review: ☐ No ☐ Yes
Commission Decision: ☐ Approved ☐ Disapproved

BFT-34-55(S/23035) AES-23-44 (R01/26)

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AFFIDAVIT

This form is to be completed by the licensee or pest control operator verifying the applicant's training and experience under their supervision.

Applicant's Name: _____ Applicant ID Number: _____

Social Security Number: _____ Date of Birth: _____

Name of Company: _____ Location: _____

Applicant was engaged as a: ☐ Salesman ☐ Serviceman

Start Date (MM/DD/YYYY): _____ End Date (MM/DD/YYYY): _____

Applicant's work was: ☐ Satisfactory ☐ Unsatisfactory

Phases Requested (Registered and Trained in. Choose all that apply):

- ☐ General Pest Control
- ☐ Commercial Vertebrate Control
- ☐ Termite Control
- ☐ Structural Fumigation
- ☐ Commodity Fumigation
- ☐ Ship Fumigation

Signature of Licensee: _____ Date (MM/DD/YYYY): _____

Sworn to and subscribed before me on this _____ day of _____, 20_____.

Signature of Applicant: _____ Date: _____

Notary Public Seal:

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