PEST CONTROL ADVISER COUNTY REGISTRATION

Attach PCA License Copy Here
or
Include in E-mail Attachment

Registration Expiration Date:
December 31, _____ (Year)

For Registration In County Of:
Sacramento

Adviser's Employer

Address

City & State | Zip Code

Adviser's Signature | Date

Written Recommendations Are Available At (City & Street)

Sacramento County
Agricultural Commissioner's Office
and Sealer of Weights & Measures
4137 Branch Center Rd
Sacramento, CA 95827-3823
(916) 875-6603
AGCOMMPUE@saccounty.gov

Agricultural Commissioner's Signature by: | Date

Mailing Address (if different from above)

City | State | Zip

E-Mail Address:

Office Phone No.

Adviser's Cell Phone No.

rev. 10/25

Cash: ☐ Check: ☐ Credit: ☐

Online Payment Confirmation #: _____

Fees:
Home County: $10.00 ◯
Out of County: $5.00 ◯

Additional Information:

Registration Fee Received: County Use Only

$ _____ Date _____

Cash ☐ Check # _____

Receipt # _____

Online Payment Verified by Accounting ☐