



Wyoming DEPARTMENT OF Agriculture

2219 CAREY AVE | CHEYENNE, WY 82002 | PHONE: 307-777-7324 | FAX: 307-777-6593 | agrtshelpdesk@wyo.gov

OFFICE USE ONLY
Payment Method:
Processed Date:
License Code:
Establishment No.:

TECHNICAL SERVICES DIVISION
PREDATOR/PESTICIDE AIRCRAFT LICENSE APPLICATION

PLEASE CHOOSE (CHECK ONE): NEW APPLICATION or RENEWAL

ESTABLISHMENT NUMBER (IF RENEWING):

LICENSE APPLICANT INFORMATION

COMPANY NAME: CONTACT NAME:

MAILING ADDRESS: STREET CITY STATE ZIP

PHYSICAL ADDRESS: STREET CITY STATE ZIP

TELEPHONE: () - E-MAIL:

AIRCRAFT INFORMATION

AIRCRAFT NO.: AIRCRAFT MANUFACTURER:

AIRCRAFT MODEL: AIRCRAFT COLOR:

PILOT INFORMATION

NAME: LAST FIRST M.I. FAA PILOT NO.: WDA LICENSE NO.:

NAME: LAST FIRST M.I. FAA PILOT NO.: WDA LICENSE NO.:

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CONSENT STATEMENT

YOUR SIGNATURE BELOW INDICATES THAT YOU: HAVE READ AND UNDERSTAND ALL APPLICABLE WYOMING STATUTES AND REGULATIONS; AGREE TO ABIDE BY THE LAWS AND REGULATIONS SET FORTH THEREIN; UNDERSTAND EACH SECTION OF LAWS AND REGULATIONS IS SEPARATELY AND COLLECTIVELY ENFORCEABLE. NOTE: INCOMPLETE APPLICATIONS WILL BE RETURNED.

SIGNATURE OF APPLICANT

DATE

WDA OFFICIAL

DATE

LICENSING FEES

PLEASE INDICATE THE TYPE OF AIRCRAFT LICENSE YOU ARE APPLYING FOR BY SELECTING ONE (OR MORE) OF THE BELOW:

PREDATOR AIRCRAFT PESTICIDE AIRCRAFT

THERE IS A \$25 FEE ASSOCIATED WITH EACH LICENSE UNLESS OTHERWISE INDICATED. PLEASE MAKE CHECKS PAYABLE TO: WYOMING DEPARTMENT OF AGRICULTURE