

Request For Private Pesticide Applicator Data

Requests for data listings must be made **in writing** and mailed (or fax'd) to:

Pesticide Bureau
 Iowa Department of Agriculture & Land Stewardship
 Henry A. Wallace Building
 Des Moines, IA 50319
 FAX 515/242-6497

Private applicator data is available free of charge at <http://www.iowaagriculture.gov/pesticides.asp>

Phone: 515-281-6597

email: pesticides@iowaAgriculture.gov

REQUEST MADE BY AND BILLING TO BE SENT TO: (Please type or print legibly)

Company Name	
Attention	Telephone Number w/Area Code
Address	
City, State, Zip + 4	email address

I am requesting a printout (and/or labels or computer disk) of the names, addresses, certification numbers and expiration dates of **Certified Private Pesticide Applicators** currently on record for the following counties. I understand that I will be billed, and agree to pay promptly on receipt of the listing, \$1.00 per page for data services necessary to generate said listing. (There are approximately 28 records per page for printed listings.) Self-adhesive labels are billed at the rate of 9¢ each, data on computer floppy disk is \$100. **Fees subject to change without notice.**

Signature: _____ Date: _____

PLEASE SELECT:

Counties Requested:	<input type="checkbox"/> Iowa Records Only	<input type="checkbox"/> Out-of-State Records Only
	<input type="checkbox"/> Specified Counties Only (List Counties Below)	<input type="checkbox"/> Both Out-Of-State and Iowa Records
a.	b.	c.
d.	e.	f.
g.	h.	i.

Provide List On:	<input type="checkbox"/> Self-Stick Labels	<input type="checkbox"/> Standard Printout	<input type="checkbox"/> Both Labels & Printout
	<input type="checkbox"/> 3½" Disks - Format (one): <input type="checkbox"/> DBF Format <input type="checkbox"/> Fixed-Length Fields <input type="checkbox"/> Comma-Separated Fields		

Sort Sequence: (Choose Only One)
<input type="checkbox"/> Alpha by Firm <input type="checkbox"/> County/Alpha <input type="checkbox"/> Zip Code <input type="checkbox"/> License Number

Intended Purpose: Please explain in detail exactly how this data is going to be used.

Please do not write in shaded areas. The listing requested above is authorized for release, to the individual and company listed above.	PD number & Exp Date	Authorizing Signature/Pesticide Bureau/IDALS --- Date
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