60-day Exemption From Licensing Request Form

Nebraska Department of Agriculture

NDA Use Only
NEB
EXP:

The Nebraska Pesticide Act allows a person a once-in-a-lifetime, 60-day period of time during which they can apply pesticides without a license. The 60-day exemption from licensing allows a properly trained person a window of time to fulfill their licensing requirements (Nebraska Department of Agriculture (NDA) exams and payment of licensing fees).

To be eligible for the 60-day exemption from licensing, an individual must have a supervisor, licensed in the correct category(ies), who will provide training. Training must be conducted prior to applications of pesticides, and must be documented on a Verification of Training Form (http://www.nda.nebraska.gov/pesticide/training_verification.pdf) to be retained by the supervisor.

Training shall include: pesticide label information, use of protective equipment, and proper application techniques.

Applicators that have had a commercial, non-commercial, or private license at any time are NOT eligible for a 60-day exemption from licensing.

To formally request the 60-day exemption from licensing, complete and submit this form to NDA. **Requests must be submitted within 10 days of making one's first pesticide application.**

PLEASE PRINT ALL INFORMATION

For Assistance Please Call: 402-471-2351

Applicator Name:		
First	*MI*	*Last*
Home Address:		**Phone:**
City/State/Zip:		
Date of Birth: / /	**Employer:**	
Applicator Email Address:		

Check all Nebraska Categories for which applications will be made.

- ☐ (01) Ag Plant
- ☐ (01a) Soil Fumigation
- ☐ (02) Ag Animal
- ☐ (03) Forest
- ☐ (04) Ornamental & Turf
- ☐ (05) Aquatic
- ☐ (05S) Sewer Root Control
- ☐ (06) Seed Treatment
- ☐ (07) Right-of-Way
- ☐ (08) Structural/Health
- ☐ (08W) Wood Destroying Organisms
- ☐ (09) Public Health
- ☐ (10) Wood Preservation
- ☐ (14) Wildlife Damage Control

Date of Applicant's First Pesticide Application:

Supervisor Name:	
Applicator ID Number:	
Home Address:	
City/State/Zip:	
Email Address:	

Supervisor's Signature:	**Date:**
Applicant's Signature:	**Date:**

Submit within 10 days of first pesticide application to:

Nebraska Department of Agriculture Animal and Plant Health Protection P.O. Box 94756 Lincoln, NE 68509-4668	**Email: holly.hillebran@nebraska.gov**