

Application for a Pesticide Operator Licence

General Information and Instructions
Ministry of the Environment and Climate Change

General:

Information requested in this form and supporting documentation is collected under the authority of the Pesticides Act and Ontario Regulation 63/09 and will be used to evaluate applicants for Operator licences of the general class according to the requirements of the Pesticides Act. The personal information collected in this application will be used to administer the pesticides licensing program, including for the purposes of the Ministry's compliance and enforcement activities under the aforementioned act, and for the purposes of making information available to the public, as governed by the Freedom of Information and Protection of Privacy Act (FIPPA). Questions about the collection of this information can be directed to a Client Service Representative, Environmental Approvals Access and Service Integration Branch (EAASIB), Ministry of the Environment and Climate Change (MOECC), 135 St Clair Ave W, 1st Floor, Toronto, ON, M4V 1P5; telephone outside Toronto 1-800-461-6290 (toll free) or in Toronto 416-314-8001, fax 416-314-8452 or email EAASIBGen@ontario.ca.

A complete application consists of:

- a) The completed and signed application form.
- b) Proof of Legal Name (such as a copy of the Master Business Licence for a company, or a copy of the birth certificate for an individual).
- c) A certified cheque, money order or credit card payment for the amount specified on the application form.
- d) A complete list of business physical locations and licence details of at least one licensed exterminator in charge for each location (if more than one).
- e) A complete list of employed licensed exterminators and licence details (if more than one).

Incomplete applications will be returned to the applicant.

Instructions

1. **Applicants are responsible for ensuring that they complete the most recent application form.** When completing this form, please refer to the publication titled "Guide to Pesticide Licensing and Certification" (PIBS 4523). Application forms and supporting documentation are available from the EAASIB, from your local MOECC District Office and on the MOECC's website at: <http://www.ontario.ca/pesticides>.
2. Questions regarding completion and submission of this application should be directed to the EAASIB or to your local District Office of the MOECC.
3. To apply for an Ontario Operator licence, the applicant must:
 - Be at least 18 years of age;
 - Be the holder of an Ontario pesticide Exterminator licence, or if a partnership or corporation, then the partner or designated official representative must be a holder of an Ontario pesticide Exterminator licence
 - Have insurance coverage for the pesticide extermination business as outlined in section 93 of Ontario Regulation 63/09.
4. Please forward the completed application along with your fee and any supporting information by fax to (416) 314-8452 or by mail to **(do not submit by email)**:

Director, Pesticides Act
Environmental Approvals Access and Service Integration Branch
Ministry of the Environment and Climate Change
135 St Clair Ave W, 1st Floor, Toronto, ON, M4V 1P5
5. A \$200.00 licence fee is required. Payment by certified cheque, money order or credit card must be made payable to the *Ontario Minister of Finance*. **Other methods of payment will not be accepted.** All Operator licences expire on the 15th day of February in the year following their issue. For more information about the requirements and restrictions associated with Operator licences, please refer to the "Guide to Pesticide Licensing and Certification" (PIBS 4523).

6. An Operator in business must notify the MOECC of the physical site address and the name of the licensed Exterminator in charge of the location. **If operating out of more than one physical location, please attach a separate list containing this required information for each of the sites.**
7. An Operator must provide the MOECC with a list of the names and licence numbers of all licensed Exterminators employed by the applicant as per Section 38(6) of Ontario Regulation 63/09. **If there is more than one employed licensed Exterminator, please attach a separate list with the required information for each licensed Exterminator.**
8. The Operator **must** notify the MOECC of any changes to the information contained in this application in writing within **10 days** of the change as per Section 38 (12) of Ontario Regulation 63/09. Please use the "Pesticide Licence Information Update Form" (PIBS 4890) available on the MOECC website as above.
9. Every licensed Operator that stores Class 1 to 8 pesticide products must provide written notice of this pesticide storage annually to the Fire Department responsible for the area in which the pesticide is stored. If the Operator stores pesticides at more than one physical location, the Fire Department responsible for each area in which the pesticide is stored must be provided with written notice of this pesticide storage annually.
10. For definition purposes, the "Business Identification Number" referred to in section 1 of this application is the number assigned to all registered business names by the Ministry of Consumer & Business Relations.
11. Information not flagged as confidential in Section 5 of the application may be made available to the public upon request.

Pesticide Insurance Guide
Pesticides Act and Regulation 63/09 s.93

1. Regulation 63/09 made under the Pesticides Act requires that every Operator of an extermination business in Ontario shall carry insurance.
2. The insurance must be in a form approved by the Superintendent of Financial Services of the Province of Ontario.
3. The contract of insurance shall provide for at least **\$1,000,000** of comprehensive coverage for liabilities of the Operator and all of the Operator's employees, with respect to death, injury or property damage arising out of any one incident.
4. The contract of insurance shall also provide for pollution coverage for emissions or discharges of chemicals into the environment as part of the business operated under authority of the licence. This contract of insurance shall provide for at least **\$200,000** of pollution coverage with respect to death, injury or property damage arising out of any one incident.
5. **In addition:** If the Operator's extermination business involves the airborne application of pesticides, the contract of insurance shall include coverage for liability for off target pesticide disposition in an amount of not less than:
 - a. **\$100,000** with respect to death or injury arising out of any one incident; and
 - b. **\$25,000** with respect to property damage arising out of any one incident.
6. The liability coverage for the insurance must be at least **\$25,000** to each employee of the Operator provided that the contract of insurance may limit the insurer's liability to **\$50,000** for any one incident.
7. However, if the Operator provides evidence that their business is covered under the *Workplace Safety and Insurance Act* and the Operator is paying, and continues to pay, all premiums and any other amounts required under that Act, as they fall due, then the Operator does not need the liability coverage in the contract of insurance as described in paragraph 6, above.
8. The contract of insurance may allow the insured to pay a deductible for the first **\$2,500** of each claim for which an amount of coverage is required.
9. The contract of insurance must include a clause that states that the insurer shall give 30-day notice before any cancellation of the insurance by either the insurer or the insured. The 30-day notice shall be provided by registered mail to the Director appointed under the Pesticides Act. The contract of insurance shall remain in full force and effect until after the 30-day notice period has expired.
10. The contract of insurance must include a clause that states that the insurer shall pay any claims covered by the contract of insurance to claimants who have recovered a judgment. The insurer shall pay the claimant even if the insured has taken an act that has made the policy void, has defaulted, or has given the insurer a defense to an action by the insured. This provision in the contract of insurance shall not limit the insurer's right to later recover the payment from the insured.



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For Office Use Only	
Licence Number	Billing Number

1. Applicant Information

Business Owner					
First Name		Middle Initial	Last Name		
Company information					
Business Name <i>(legal name of individual or organization as evidenced by legal documents)</i>				Business Identification Number	
Trade Name <i>(the common name that the individual or organization operates under, if different than the business name)</i>					
Mailing Address					
Apartment/Suite Number		Address <i>(street number & name, rural route, general delivery or PO Box)</i>			
City		Province/Territory/State		Country	
Postal Code/Zip Code		Telephone/Cellular Number <i>(including area code & extension)</i>		Fax Number <i>(optional)</i>	

2. Store Physical Address Information *(If operating out of more than one physical location, please attach a separate list that identifies each location and includes the name, and licence number and expiry date of the Exterminator in Charge for each location)*

Is the Physical Address Information the same as the Mailing Address Information provided in section 1 (above)? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>If no, please include physical address information below</i>					
Apartment/Suite Number		Address <i>(street number & name, lot & concession or other information that describes the location; note - a PO Box number is not accepted)</i>			
City		Province/Territory/State		Country	
Postal Code/Zip Code		Telephone/Cellular Number <i>(including area code & extension)</i>		Fax Number <i>(optional)</i>	
Exterminator in Charge					
First Name		Middle Initial	Last Name		
Existing Licence Number(s)		Type/Class (Description)		Date of Expiry (dd/mm/yyyy)	
Geo Reference					
Map Datum	Zone	Accuracy Estimate	Geo Referencing Method	UTM Easting	UTM Northing

3. Business Information

Type of Application		
<input type="checkbox"/> New Licence	<input type="checkbox"/> New Licence Resulting from a Change of Ownership (Record Existing Licence # (s) _____)	<input type="checkbox"/> Other (describe): _____
Applicant Type		
<input type="checkbox"/> Corporation	<input type="checkbox"/> Individual/Sole Proprietor	<input type="checkbox"/> Partnership
	<input type="checkbox"/> Federal / Provincial / Municipal Government	<input type="checkbox"/> Other (describe): _____
Number of Vehicles to be used to transport or apply a pesticide in connection with an extermination		

4. Employed Exterminators (If there is more than one employed licensed Exterminator, please attach a separate list that includes the name, Exterminator licence and expiry date of each employed licensed Exterminator)

Is the Employed Exterminator the same as the Exterminator in Charge provided in section 3 (above)?		
<input type="checkbox"/> Yes	<input type="checkbox"/> No	If no, please include employed Exterminator(s) information below
First Name	Middle Initial	Last Name
Existing Licence Number(s)	Type/Class (Description)	Date of Expiry (dd/mm/yyyy)
Notes: The applicant must submit a complete list of the names and licence numbers of all employed licensed Exterminators (see subsection 38(6) of Ontario Regulation 63/09)		

5. Insurance Information (if applicable)

<p>The company named on this form must hold insurance issued to the same company name that fulfills the insurance provisions listed in Regulation 63/09 if the business performs more than the following exterminations per s.92 of Ontario Regulation 63/09:</p> <p>(a) Class 5, 6 or 7 pesticide used for tree wound dressing, wood preservative, or insecticide bait (access by humans and pets minimized / prevented)</p> <p>(b) Class 4, 5, 6 or 7 pesticide injected into trees, stumps or wooden poles; or</p> <p>(c) Class 5 or 6 pesticide containing non-pesticide ingredient, for structural extermination, other than soap, mineral oil, or silicon dioxide (diatomaceous earth).</p> <p>This insurance coverage must not lapse during the term that the Operator is carrying on an extermination business.</p>		
Does the company named on this form require insurance?		
<input type="checkbox"/> Yes	<input type="checkbox"/> No	If yes, please include insurance policy information below
Policy Number	Policy Expiry Date (dd/mm/yyyy)	
Insurance Company Contact Information		
Name of Insurance Company		
Apartment/Suite Number	Address (street number, name & other mailing address information; note - a PO Box number is not accepted)	
City	Province/Territory/State	Country
Postal Code/Zip Code	Telephone/Cellular Number (including area code & extension)	Fax Number (optional)

6. Supporting Information Checklist – This is a list of all supporting information to this application and is subject to the FOIPPA

Attachment	Required?	Required if...	Confidential* (√)
Application Fee: Certified Cheque, Money Order or Credit Card	Yes	Always Required	<input checked="" type="checkbox"/>
Proof of legal Operator business name	Yes	Always Required. Examples include: <ul style="list-style-type: none"> Updated Corporate Profile Report, Master Business Licence; “Initial Notice or Notice of Change”; Articles of Incorporation; Extra-Provincial Licence (for out of Province companies); or Birth Certificate (for applicants applying as an individual) 	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/>
Complete list of business physical locations and licence details of at least one Exterminator in charge for each location	Yes	If the business operates in one or more locations	<input type="checkbox"/>
Complete list of employed Exterminators and Ontario licence details	Yes	If the business employs one or more licensed Exterminator	<input type="checkbox"/>
Exterminator licence details for at least 1 business owner (Individual Owner, Partner or Official Representative)	Yes	Always required.	<input type="checkbox"/>
Other Attachments		Please specify:	<input type="checkbox"/>

7. Signature of Business Owner / Official Representative(s)

(In the case of a partnership, each partner must sign the application. In the case of a corporation, each designated official representative must sign the application. Attach as separate list.)

I, the undersigned hereby declare that, to the best of my knowledge:		
<ul style="list-style-type: none"> the information contained herein and the information submitted in support of this application is complete and accurate in every way and I am aware of the penalties against providing false information as per s.17(5) of the Pesticides Act. the company named on the Operator licence issued under the Pesticides Act is insured according to Regulation 63/09 and fulfills the insurance provisions listed in the regulation. This insurance coverage will not be allowed to lapse during the term that the Operator is carrying on an extermination business. I am at least 18 years of age. I shall ensure that the corporation complies with the Pesticides Act and the regulations. 		
Name <i>(please print)</i>	Title	
Signature	Date <i>(dd/mm/yyyy)</i>	
<i>An individual applicant or at least one of the partners or designated official representatives must be identified and have a valid Exterminator licence.</i>		
Existing Licence Number(s)	Type/Class (Description)	Date of Expiry <i>(dd/mm/yyyy)</i>



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9. Payment Information *(applicable taxes are included and do not need to be calculated separately)*

Method of Payment		
<input type="checkbox"/> Certified Cheque	<input type="checkbox"/> Money Order	<input type="checkbox"/> VISA <input type="checkbox"/> MasterCard <input type="checkbox"/> American Express
Credit Card Information <i>(if paying by credit card)</i>		
Name on Card <i>(please print)</i>	Credit Card Number	Expiry Date (mm/yy)
Cardholder Signature	Date (dd/mm/yyyy)	Amount Enclosed \$ 200

This page can only be mailed or faxed to our office with the application. For the protection of your credit card information, do not submit by email.

For office use only: this page is to be detached from the application form upon the issuance of the licence