



STATE OF MISSOURI
 DEPARTMENT OF AGRICULTURE
APPLICATION FOR REGISTRATION OF PESTICIDES

Application is hereby made for the registration of the following _____ pesticide(s) for a period beginning with the actual date of registration and ending December 31, 20 ____ : (List products to be registered below).

| | | | | | |
|---|--|--------------|------------------|----------------|----------------|
| ADDRESS CORRESPONDENCE TO <div style="border: 1px solid black; height: 80px; margin-top: 10px;"></div> | SUBMITTED BY <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td style="padding: 2px;">CONTACT NAME</td></tr> <tr><td style="padding: 2px;">TELEPHONE NUMBER</td></tr> <tr><td style="padding: 2px;">E-MAIL ADDRESS</td></tr> <tr><td style="padding: 2px;">DATE SUBMITTED</td></tr> </table> | CONTACT NAME | TELEPHONE NUMBER | E-MAIL ADDRESS | DATE SUBMITTED |
| CONTACT NAME | | | | | |
| TELEPHONE NUMBER | | | | | |
| E-MAIL ADDRESS | | | | | |
| DATE SUBMITTED | | | | | |

| PRODUCT NAME(S) | * CLASS | EPA REG. NO. |
|-----------------|---------|--------------|
| | | |

*** CLASSIFICATION: RESTRICTED USE "R"; GENERAL USE "G"**

Labels may be e-mailed to pestlabels@mda.mo.gov or submitted on a CD in pdf format. Please note on this form the date the labels were e-mailed: _____
DATE LABELS EMAILED

Remittance at \$200.00 for each product payable to the Missouri Department of Agriculture in an amount of \$ _____ is enclosed to cover annual registration fees for the period ending December 31, ____ . Confirmation of registration will be mailed to you upon registration.

More information and forms are available on our website mda.mo.gov

Return to: Plant Industries Division
 Attn: Pesticide Registration
 P.O. Box 630
 Jefferson City, MO 65102