

Georgia Department of Agriculture

Tyler Harper, Commissioner

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Unlicensed Structural Pest Control Operator Notification Form

I would like to submit the following observations (which might include evidence such as photos, contracts, receipts, etc.) of what would appear to be unlicensed pest control operations to the Department.

Observations:			Date:_	Ti	me:
Location where activity observed: (if any)			County:		
Street Address					
City	State			Zip Code	
Vehicle involved (in Indicate if vehicle d				(if not GA, indicat f any)	re STATE)
Indicate location w	here vehicle is par	ked/garage	ed (if known)	
Make: Model:			_Color:	olor:Year:	
SUSPECTED CUSTO	MERS (if any)				
Name of Individual(s)			Contact telephone number		
Street Address	Cit	y		State	Zip Code
YOUR CONTACT IN	FORMATION				
Name			Contact telephone number		