



## GEORGIA DEPARTMENT OF AGRICULTURE

Tyler Harper, Commissioner

[www.agr.georgia.gov](http://www.agr.georgia.gov)

Structural Pest Division  
Telephone: (404) 656-3641  
Fax: (404) 463-6671

### **INSTRUCTIONS FOR COMPLETING THE COMPANY LICENSE APPLICATION**

#### **APPLICANT INFORMATION**

This person might be the same person as the certified honey bee control and removal operator.

#### **COMPANY INFORMATION**

You may submit more than one company name to be considered. The Commission may reject a name, if it is likely to be confused with a previously issued name (Chapter 620-2-.01 of the Rules of the Georgia Structural Pest Control Act).

#### **LICENSE INFORMATION**

This license only allows for operation in the category of Structural Pest Control Honey Bee Removal pursuant to Chapter 620-9 Control and Removal of Honey Bees from Structures. No pesticides can be used under this license. A Certified Honey Bee Control and Removal (HBR) Operator is a person who has satisfied the requirements for certification outlined in Rule 620-9-.02. If you already have a Structural Pest Control Company License in another category, and would like to add HBR, please use the [Add a Category Form](#).

#### **FEES SUBMITTED**

Fees required are listed on the application. Be sure the amount paid matches the total fee enclosed box and to include a check, certified check, or money order for the correct amount. Applications received without payments will be returned.

#### **INSURANCE INFORMATION**

The license will not be issued without proof of insurance. The [Insurance Form](#) must have the approved company name and meet these minimum requirements: Bodily Injury – Any One Occurrence \$50,000, Property Damage – Any One Occurrence \$50,000, and Minimum Annual Aggregate \$200,000. An authorized representative must complete the form, and it can be mailed, emailed ([insurance@agr.georgia.gov](mailto:insurance@agr.georgia.gov)), or faxed to the Structural Pest Division Office.

#### **APPLICANT AND CERTIFIED HONEY BEE CONTROL REMOVAL OPERATOR**

All applicable individuals must sign the application. Unsigned applications will be returned.

Applications received by the 1<sup>st</sup> day of the month will be considered by the Commission at their monthly meeting.

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**Georgia Department of Agriculture**  
 Structural Pest Division  
 19 Martin Luther King, Jr. Drive, Room 411  
 Atlanta, Georgia 30334-4201

<b>HONEY BEE REMOVAL STRUCTURAL COMPANY LICENSE APPLICATION</b>		Official Use Only	
		Check #	
		Amount	\$
<b>APPLICANT INFORMATION</b>			
Applicant's Name			
<b>COMPANY INFORMATION</b>			
Company Name		County	
Company Name (2 <sup>nd</sup> Choice)		Company Name (3 <sup>rd</sup> Choice)	
Street Address		Mailing Address (if different from street Address)	
City	State	Zip	City State Zip
Telephone Number		Fax Number	
Website		Email	
<b>LICENSE INFORMATION</b>			
License category	Honey Bee Control and Removal		
Certified Honey Bee Control and Removal Operator	Name	Certification #	
Type of License	Company License		
<b>FEES SUBMITTED (Can be paid by Certified Check or Money Order)</b>			
<b>\$100.00</b> Company License Fee	<b>\$70.00</b> Research Fee		Total Fee enclosed <b>\$170.00</b>
<b>INSURANCE INFORMATION</b>			
The license can not be issued without proof of insurance.		Attached	Submitted separately
<b>APPLICANT AND CERTIFIED HONEY BEE CONTROL AND REMOVAL OPERATOR</b>			
<b>I hereby certify that the information given in this application is true and correct.</b>			
Signature of Applicant		Date	
Signature of Certified Honey Bee Control Removal Operator		Date	Certification #
<b>FOR OFFICIAL USE ONLY</b>			
Signature of Chairman of Structural Pest Control Commission		Date	