



# PEST CONTROL AIRCRAFT PILOT

## 2023 Registration

Pilot Name: \_\_\_\_\_

Check one:

Journeyman

Apprentice

*If Apprentice, provide Name and Pilot License # of Journeyman Pilot registered in County supervising you:*

Name: \_\_\_\_\_

Lic # : \_\_\_\_\_

Employer's Name: \_\_\_\_\_

Physical Address: \_\_\_\_\_

*(Required)*

Mailing Address: \_\_\_\_\_

*(If different)*

Telephone # \_\_\_\_\_

Fax # \_\_\_\_\_

Cell / Emergency Phone # \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Date Submitted: \_\_\_\_\_

Information from CA DPR issued Card

Name	_____
Card # (w/ Category)	_____
Issue date	_____
Exp date	_____
Address on Card	_____
	_____

**San Bernardino County Department of Agriculture / Weights & Measures**

**777 East Rialto Avenue, San Bernardino, CA 92415-0720**

**(909) 387-2105**

**(800) 734-9459**

**Fax (909)387-2449**

**[www.sbcounty.gov/awm](http://www.sbcounty.gov/awm)**

**Submit by E-mail**

If the "Submit by E-mail" button fails, you can manually e-mail it to: [awm@awm.sbcounty.gov](mailto:awm@awm.sbcounty.gov)