

PEST CONTROL ADVISER

2026 Registration

Adviser Name:				
Employer's Name	::			
Employer's Addre	ess:			
Mailing Address: (If different)				
Telephone #				
Fax#				
Cell / Emergency	Phone #		_	
E-mail Address:				
Physical location v	where Recommendations	s are stored (if Adviser is outsi	ide County) :	
Date Submitted:				
	<i></i>			
	Name			
Information	Card # (w/ Categories)			
from CA DPR	Issue date			
issued Card	Exp date			
	Address on Card			
	;		;	
	<u></u>			

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 <u>www.sbcounty.gov/awm</u>

Submit by E-mail

If the "Submit by E-mail" button fails, you can manually e-mail it to:

awm@awm.sbcounty.gov