

# INSTRUCTIONS

## PRODUCTS WHICH REQUIRE REGISTRATION

Under Vermont Law all pesticides are defined as Economic Poisons and require state registration. An Economic Poison is defined as:

any substance produced, distributed or used for preventing, destroying or repelling any insects, rodents, nematodes, fungi, weeds, or other forms of plant or animal life or viruses, except viruses on or in living humans or other animals, which the Secretary shall declare to be a pest or any substance produced, distributed or used as a plant regulator, defoliant or desiccant.

Pesticide products are misbranded if they do not display an EPA Registration Number or a Vermont Registration Number. For Pesticide products which are 25(b) federally exempt, a UPC code or a company product number is used to identify the product. Please indicate the code or number on the application form.

MAIL THE REGISTRATION APPLICATION ALONG WITH YOUR CHECK AND LABEL (S) TO:

Vermont Agency of Agriculture, Food and Markets  
Business Office L&R  
100 State Street Rm 342  
Montpelier, VT 05620-3206  
(802) 828-2436

## APPLICATION FOR REGISTRATION:

Submit the entire Application. Your Certificate of Registration will be mailed to you. Please type or print all information.

Attach securely to the application **in order** of products listed:

1. A **CD copy** of the federally registered label (actual product label not EPA approved label),
2. Labeling **ONLY ON CD** is required by the State of Vermont for registration of 25(b) federally exempt products, including a copy or statement of all claims that will be made for this product.
3. You may upload all other labels to ALSTAR, please indicate on the application form if you have done so.

***PRODUCT NAME(S):*** Please list each name of product and the EPA or UPC or Product number.

VERMONT AGENCY OF AGRICULTURE, FOOD AND MARKETS  
BUSINESS OFFICE L&R  
100 STATE STREET RM 342  
MONTPELIER, VT 05620-3206

APPLICATION FOR REGISTRATION OF PESTICIDES

Application for registration of pesticide(s) named below is hereby filed with the Secretary of Agriculture. (See instructions on reverse side).  
**Registration period is December 1 to November 30 inclusive. The cut-off date for receiving new products is October 1<sup>st</sup>.**

Remittance, payable to the Agency of Agriculture, Food and markets, is enclosed to herewith to cover the annual registration fee(s) for \_\_\_\_\_ products at **\$175.00** per product. **Make sure to enclose a CD with copy of the label(s).** Total \$ \_\_\_\_\_

**Registrant:**

(Company who registers product(s) with the EPA)

Firm \_\_\_\_\_

Street or PO Box \_\_\_\_\_

City & State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone No. \_\_\_\_\_ Ext \_\_\_\_\_

**Correspondent:**

(Company that we mail the renewal to & call with registration questions)

Firm \_\_\_\_\_

Street or PO Box \_\_\_\_\_

City & State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone No. \_\_\_\_\_ Ext \_\_\_\_\_

**PLEASE FILL OUT THE REGISTRANT &  
CORRESPONDENT INFORMATION - INCOMPLETE  
APPLICATIONS WILL BE RETURNED TO YOU**

Contact Person \_\_\_\_\_

E-Mail Address \_\_\_\_\_

Correspondents Federal Identification Number (Co. who writes the checks) \_\_\_\_\_

**CERTIFICATION OF COMPLIANCE WITH 32 V.S.A. SECTION 3113**

I hereby certify, under the pains and penalties of perjury, that I am in good standing with respect to, or in full compliance with a plan approved by the Commissioner of Taxes to pay any and all taxes due the State of Vermont as of the date of this application.

Date: \_\_\_\_\_ Signature & Title \_\_\_\_\_

IF YOU ARE NOT IN GOOD STANDING AT THIS TIME, you may do one of the following three things:

3. Discontinue this certificate or certificate renewal application;
4. Arrange with the Vermont Department of Taxes to bring yourself into good standing through a payment plan approved by the Commissioner or otherwise;
5. Seek a determination from the licensing agency that immediate payment of taxes due and payable would impose an unreasonable hardship.

**Product Name (see instructions)** \_\_\_\_\_ **EPA Reg. #** \_\_\_\_\_ **Classification Coding** \_\_\_\_\_  
**or UPC code if 25b** \_\_\_\_\_ **For Office Use Only**

**For Office Use Only**

Label Co. Name \_\_\_\_\_