

SCHEDULE "A"

Do not write in this space

Licence No.
Receipt
Date Issued



PROVINCE OF MANITOBA

Department of Agriculture and Conservation

APPLICATION FOR PESTICIDE DEALER'S LICENCE

under

"The Pesticides Control Act"

Name of Applicant

Address

Name of person in charge of selling, distributing or supplying pesticides

.....

Dated at in Manitoba, this day of

....., 19

.....
Signature of Applicant

(Fee \$10.00)