



Application for Pesticide Application Permit

Under section 35 of the *Pesticide Control Act* Regulations, a person who applies Schedule 1 pesticides or applies pesticides to an open body of water, to control mosquitoes or biting flies within a designated protected zone, must hold a Pesticide Application Permit.

Personal information on this form is collected under section 19 of the *Pesticide Control Act* Regulations as it relates directly to and is necessary for an application for a Pesticide Application Permit. Personal information may be disclosed to third parties in accordance with provincial legislation. If you have any questions about this collection of personal information, you may contact the Pesticide Regulatory Program, 11 Kent Street, Jones Building, Charlottetown, PEI C1A 7N8, (902) 368-5599.

Section 1 – Applicant Contact Information	
Name:	
Phone:	Fax:
Mailing Address:	
Civic Address:	
Postal Code:	Email:

Section 2 – Complete for Mosquito and Biting Fly Control			
Type of Application:	<input type="checkbox"/> New Permit	<input type="checkbox"/> Modification of Permit	Existing Permit Number:
Treatment Type:	<input type="checkbox"/> Water Treatment	<input type="checkbox"/> Private Treatment	<input type="checkbox"/> Land Treatment <input type="checkbox"/> Commercial Treatment

Applicators/Certificates (list all applicators)		
Applicator Name	Pesticide Applicator Certificate No.	Class

Treatment Details						
Treatment	Pest to Be Controlled	Pesticide Name	PCP* No.	Proposed Date of Treatment	Proposed Rate of Application	Total Amount of Pesticide Used
1						
2						
3						
4						
5						

*** Pesticide Control Product Registration Number**

Describe the process and level of community support for the program (attach separate sheet if required):

Are "Permission to Enter Private Property" authorizations required? Yes No
 If "Yes", include authorizations with application.

Requirements:

A map (1:25,000 scale) must be attached and identify:

- (a) all property lines, fields, and treatment areas; and
- (b) all open bodies of water, as defined under the Prince Edward Island *Pesticides Control Act*, saltwater environments and perimeter coastline.

Section 3 – Complete for Application to Open Body of Water

Type of Application: New Permit Modification of Permit **Existing Permit Number:**

Treatment Type: Private Treatment Commercial Treatment

Pesticide Applicator Certificate:	Name:
	Number:
	Class:
	Expiry date:

Treatment Details

Treatment	Total Treatment Area		Pest to Be Controlled	Pesticide Name	PCP* No.	Proposed Date of Treatment	Proposed Rate of Application	Total Amount of Pesticide Used
	<input type="checkbox"/> Acres	<input type="checkbox"/> Hectares						
1								
2								
3								
4								
5								

*** Pest Control Product Registration Number**

Requirements:
 A map (1:10,000 scale) must be attached and identify:
 (a) all property lines, fields, and treatment areas; and
 (b) all open bodies of water, as defined under the Prince Edward Island *Pesticides Control Act*; saltwater environments and perimeter coastline.

Section 4 – Complete for Schedule 1 Pesticides (Soil Fumigant Formulations)

Type of Application: New Permit Modification of Permit **Existing Permit Number:**

Pesticide Applicator Certificate:	Name:
	Number:
	Class:
	Expiry date:

Treatment Details

Property Identification No.	Field No.	Crop	Pesticide Name	PCP * No.	Total Treatment Area	
					<input type="checkbox"/> Acres	<input type="checkbox"/> Hectares

*** Pest Control Product Registration Number**

Time of Proposed Treatment:

Spring Proposed treatment date(s): _____

Fall Proposed treatment date(s): _____

Distance to Wells/Residences

Property Identification No.	Field No.	Distance (m) to Nearest Well (Indicate Private or Municipal)	Distance (m) to Nearest Occupied Habitation	Distance (m) to Nearest Property Line

Requirements:

1. An Environmental Farm Plan must be completed for all owned properties.
2. Product use must be in compliance with the product label, and with all additional legal requirements, including the PEI *Environmental Protection Act* and the PEI *Agricultural Crop Rotation Act*.
3. A map (1:10,000 scale) must be attached and identify:
 - a. all property lines, fields, and treatment areas;
 - b. all occupied habitations within 1,000 metres of the treatment area;
 - c. all municipal and/or private drinking water wells within 1,000 metres of the treatment area; and
 - d. all open bodies of water, as defined under the PEI *Pesticides Control Act*; saltwater environments; and/or perimeter coastline.
4. Application for a permit must be made at least four weeks in advance of anticipated or planned product application.

Section 5 – Complete for Application to Designated Protected Zone

Type of Application: New Permit Modification of Permit Existing Permit Number: _____

Pesticide Applicator Certificate	Name:
	Number:
	Class:
	Expiry date:

Treatment Details

Property Identification No.	Total Treatment Area		Pest*	Pesticide Name	PCP** No.	Rate of Application
	Acres	Hectares				

** A Pesticide Application Permit will only be issued for the control of a noxious weed, as designated under the Weed Control Act.*

**** Pest Control Product Registration Number**

Requirements:
 A map (1:10,000 scale) must be attached and identify:
 (a) all property lines, fields, and treatment areas; and
 (b) all open bodies of water, as defined under the Prince Edward Island *Pesticides Control Act*, saltwater environments and perimeter coastline.

By signing below, I acknowledge that all information that I have provided is, to my knowledge, true and accurate, and that I understand the above listed criteria for approval of a Pesticide Application Permit.

Applicant's Signature: _____ Date: _____

- The application fee for a Pesticide Application Permit is \$50 per permit.
- Payment must be received by the department before the application will be processed.
- A separate application is required for each Pesticide Application Permit.

Method of Payment (Check appropriate box)
 Cheque
 Money Order
 Cash or Debit Card
 Credit Card

Amount Enclosed: \$ _____

Please forward application and payment to:
 Department of Environment, Energy and Climate Action
 Pesticide Regulatory Program
 PO Box 2000, 11 Kent Street
 Charlottetown, PE C1A 7N8

Tel: (902) 368-5599

**Cheques and money orders should be made payable to the Minister of Finance.
 Pesticide Application Permits will be mailed to the applicant's address above.
 Please allow two weeks for delivery.**