

# Board of County Commissioners



## Hernando County Building Division

789 Providence Boulevard  
Brooksville, FL 34601  
Phone: 352-754-4050

Visit us on the Internet:  
[www.hernandocounty.us](http://www.hernandocounty.us)

Fax Numbers:

Permitting 352-754-4416     Zoning: 352-754-4151     Contractor Licensing 352-754-4159

### COMMERICAL AND INSTITUTIONAL FERTILIZER APPLICATOR REGISTRATION

**FEE: \$50.00**

**PLEASE PRINT LEGIBLY**

DATE: \_\_\_\_\_

NAME AS IT APPEARS ON LICENSE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

PHONE: (\_\_\_\_) \_\_\_\_\_ CELL PHONE: (\_\_\_\_) \_\_\_\_\_

FAX NO.: (\_\_\_\_) \_\_\_\_\_ COUNTY: \_\_\_\_\_

\*LICENSE OR TRAINING CERTIFICATE NO.: \_\_\_\_\_

EXPIRATION DATE: \_\_\_\_\_

*\*A copy of the license or training certificate must be submitted with the registration form.*

\_\_\_\_\_  
SIGNATURE OF LICENSE HOLDER

STATE OF \_\_\_\_\_ COUNTY OF \_\_\_\_\_

The foregoing instrument was acknowledged before me this \_\_\_\_\_ day of \_\_\_\_\_,  
20\_\_\_\_, by \_\_\_\_\_ who is: \_\_\_ personally known to me or \_\_\_ who has  
produced \_\_\_\_\_ as identification.

\_\_\_\_\_  
SIGNATURE OF NOTARY PUBLIC

\_\_\_\_\_  
PRINT, TYPE OR STAMP NAME OF NOTARY