

STATE OF ILLINOIS
DEPARTMENT OF AGRICULTURE
BUREAU OF ENVIRONMENTAL PROGRAMS
P.O. BOX 19281, FAIRGROUNDS
SPRINGFIELD, ILL 62794-9281
(217) 785-2427 -- TDD # (217) 785-2427

APPLICATION FOR REGISTRATION
ECONOMIC POISONS

DATE REGISTRATION ACCEPTED AND VALID _____

NO. OF PRODUCTS _____ TOTAL ENCLOSED \$ _____

FEEES - \$400.00 PER COMPANY AND ALSO
\$200.00 PER PRODUCT

YEAR ENDING: December 31, _____

Company Name & Address:

ENCLOSE A COPY OR FACSIMILE OF LABEL FOR EACH PRODUCT. EVERY PACKAGE OR BULK SHIPMENT MUST BE LABELED AS DESCRIBED. FORMULATOR OR MANUFACTURER NAME & ADDRESS WILL BE SHOWN. ACTIVE INGREDIENT AND PERCENT MUST BE SHOWN. EACH REGISTRATION PERMITS SALE UNTIL CANCELLATION OR END OF YEAR.

IMPORTANT NOTICE

THIS STATE AGENCY IS REQUESTING DISCLOSURE OF INFORMATION THAT IS NECESSARY TO ACCOMPLISH THE STATURORY PURPOSE AS OUTLINED, UNDER 415 ILCS 60. FAILURE TO PROVIDE THIS INFORMATION SHALL PREVENT THIS FROM BEING PROCESSED. THIS FORM HAS BEEN APPROVED BY THE STATE FORMS MANAGEMENT CENTER.

U.S. EPA REGISTRATION NUMBER MUST APPEAR ON ALL LABELS
BEFORE ILLINOIS REGISTRATION IS ACCEPTED.

PRODUCT OR BRAND OF ECONOMIC POISON (list each)

U.S. EPA REG.NO.

(Print name and title of authorized representative)

TELEPHONE NUMBER

SIGNATURE: _____

FEIN # _____

Please return completed form with proper fees & associated product labels – a validated copy will be returned.