



Wyoming
DEPARTMENT OF Agriculture

2219 CAREY AVE | CHEYENNE, WY 82002 | PHONE: 307-777-7324 | FAX: 307-777-6593 | agrtshelpdesk@wyo.gov

OFFICE USE ONLY
PAYMENT METHOD: _____
Check _____ Online _____
PROCESSED DATE: _____
LICENSE CODE: _____
NEW ESTABLISHMENT No.: _____

**TECHNICAL SERVICES DIVISION
PLANT INDUSTRY LICENSE APPLICATION**

PLEASE CHOOSE (CHECK ONE): NEW APPLICATION ☐ RENEWAL ☐

CURRENT ESTABLISHMENT NUMBER (IF RENEWING): _____

WHERE WOULD YOU LIKE YOUR LICENSE SENT?: LICENSE APPLICANT ☐ ESTABLISHMENT ☐

**ESTABLISHMENT INFORMATION
(EXAMPLE: company, government agency, etc.)**

ESTABLISHMENT NAME: _____

MAILING ADDRESS: _____
STREET CITY STATE ZIP

PHYSICAL ADDRESS: _____
STREET CITY STATE ZIP

TELEPHONE: (____) ____ - ____ E-MAIL: _____

LICENSE APPLICANT / BUSINESS CONTACT INFORMATION

POINT OF CONTACT NAME: _____
LAST FIRST M.I.

MAILING ADDRESS: _____
STREET CITY STATE ZIP

TELEPHONE: (____) ____ - ____ E-MAIL: _____

CONSENT STATEMENT

YOUR SIGNATURE BELOW INDICATES THAT YOU: HAVE READ AND UNDERSTAND ALL APPLICABLE WYOMING STATUTES AND REGULATIONS; AGREE TO ABIDE BY THE LAWS AND REGULATIONS SET FORTH THEREIN; UNDERSTAND EACH SECTION OF LAWS AND REGULATIONS IS SEPARATELY AND COLLECTIVELY ENFORCEABLE. **NOTE: INCOMPLETE APPLICATIONS WILL BE RETURNED.**

SIGNATURE OF APPLICANT

DATE

WDA OFFICIAL SIGNATURE

DATE

LICENSING FEES

PLEASE INDICATE THE TYPE OF PLANT INDUSTRY LICENSE YOU ARE APPLYING FOR BY SELECTING ONE (OR MORE) OF THE BELOW:

☐ GRAIN WAREHOUSE*** (\$125)

☐ NURSERY STOCK DEALER

☐ PESTICIDE DEALER

☐ NURSERY STOCK SALESMAN

☐ SEED CLEANER/CONDITIONING

☐ SEED DEALER

THERE IS A \$25 FEE ASSOCIATED WITH EACH LICENSE UNLESS OTHERWISE INDICATED.

PLEASE MAKE CHECKS PAYABLE TO: **WYOMING DEPARTMENT OF AGRICULTURE**

MAIL CHECK AND APPLICATION TO: **2219 CAREY AVENUE, CHEYENNE, WY 82002**