

**VIRGINIA DEPARTMENT OF AGRICULTURE AND CONSUMER SERVICES  
OFFICE OF PESTICIDE SERVICES**

PO Box 526 • Richmond, VA 23218  
Phone: (804) 786-3798 • Fax: (804) 786-9149 • [www.vdacs.virginia.gov](http://www.vdacs.virginia.gov)

**PESTICIDE REGISTERED TECHNICIAN REQUEST  
FOR AUTHORIZATION TO TAKE  
PESTICIDE APPLICATOR EXAMINATION**  
**(Do not use this form for initial certification or certificate renewal)**

**RT-B**

In accordance with of the Virginia Pesticide Control Act, and regulations adopted thereunder, application is hereby made to take the written examination for Registered Technician. **(SEE PAGE 2 FOR REQUIREMENTS AND INSTRUCTIONS)**

The **non-refundable** application fee is \$25.00. Please make the check payable to: **Treasurer of Virginia**. Mail the application and check to the above address. **Federal, State, and Local Government employees are exempt from the fee. All certificates must be renewed by June 30<sup>th</sup> of the year provided on the certificate.**

**Please check the reason for requesting examination:**

**Customer\* or Certificate Number**

(\*On previous authorization letter)

- ☐ Retesting (previous exams not passed or taken): \_\_\_\_\_
- ☐ Reinstate an expired certificate: \_\_\_\_\_
- ☐ Recertify in lieu of attending a recertification course: \_\_\_\_\_

**Employment Type:**    ☐ Government Employee                      ☐ Non-Government Employee

**Requested Exam Language (only check one):**    ☐ English                      or                      ☐ Spanish (In-person/Remote Only. Not available at DMV)

**Please type or print the following information. All fields marked with an asterisk (\*) are required:**

**SOCIAL SECURITY NUMBER or ITIN\*:** \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ **DATE OF BIRTH\*:** \_\_\_\_\_  
MM / DD / YYYY

**NAME OF APPLICANT\*:** \_\_\_\_\_  
(Last) (First) (M.I.)

**MAILING ADDRESS\*:** \_\_\_\_\_ **COUNTY:** \_\_\_\_\_  
(Street or RFD)

**CITY\*:** \_\_\_\_\_ **STATE\*:** \_\_\_\_\_ **ZIP CODE\*:** \_\_\_\_\_

**HOME PHONE\*:** (    ) - \_\_\_\_\_ **EMAIL:** \_\_\_\_\_

**EMPLOYED BY\* :** \_\_\_\_\_

**DATE OF HIRE OR TRANSFER\*:** \_\_\_\_\_

**PESTICIDE BUSINESS LICENSE NO.\*:** \_\_\_\_\_ **BUSINESS PHONE NO.:** (    ) - \_\_\_\_\_

**BUSINESS ADDRESS:** \_\_\_\_\_ **COUNTY:** \_\_\_\_\_  
(Street or RFD)

**CITY:** \_\_\_\_\_ **STATE:** \_\_\_\_\_ **ZIP CODE:** \_\_\_\_\_

I certify by signing below that I am the person applying for certification and that I have received at least 40 hours of training in the skills necessary to properly apply pesticides in the performance of my job, and I agree to abide by all the laws and regulations governing pesticide usage. In addition, I certify that I am over the age of 18, and eligible for pesticide certification in the Commonwealth of Virginia.

Signature of Applicant: \_\_\_\_\_

Date: \_\_\_\_\_

Application Fee:    \$25.00

**FOR DEPARTMENT USE ONLY:**

Certificate No.	_____	Date Issued:	_____	Keyed by:	_____
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VDACS ACCT. 756-09-02437

VDACS-07212-B 01/2025

# INSTRUCTIONS FOR COMPLETING REGISTERED TECHNICIAN CERTIFICATION PROCESS

1. When the above training is completed, return the completed application with payment. (Government employees are fee-exempt). If you meet the above requirements, you will be sent a Notice of Authorization to take the certification exam.
2. The RT exam is now available in English or Spanish. Please ensure you have selected which exam you wish to take on the application. Remote testing is also available for an additional fee. An email must be provided on the application for remote testing.
3. Individuals must take the exam within 90 days of being hired or transferred into a position where duties and functions involve the commercial use of pesticides. *Individuals failing to take and pass the initial exam or subsequent exams within 90 days of the initial examination may not apply pesticides commercially, even under direct on-site supervision, until they reapply, following the procedures outlined in 2VAC5-685-20, and pass the examination.*
4. After receiving a Notice of Authorization, report to an approved VDACS or DMV testing location to take the 50-question multiple-choice test. Computerized exams at the DMV Customer Service Centers are scored as you are taking them, and you will be notified of your score as you complete each exam. Written exams taken at VDACS testing centers will be sent to the Office of Pesticide Services in Richmond to be scored. Exams taken remotely are graded after the exam session ends and the exam is submitted to the exam provider.
5. Registered Technicians who take and pass the exam at one of the DMV Customer Service Centers or using the online testing option will be issued a temporary certificate, which is good for forty-five days. A permanent certificate will be mailed to them by OPS after verification of their exam score and final review and approval of their application is complete. For Registered Technicians who take the written exam in person, exams are forwarded to OPS to be graded. Those passing the written exam will have certificates mailed after the exam is graded and entered into the database and final review and approval of their application is complete. This may take 15 business days or more.

If you fail the Registered Technician examination, you will need to submit a new application and the appropriate fee requesting a retest.

***Upon certification, Registered Technicians may apply general-use pesticides unsupervised and restricted-use pesticides only under the direct supervision of a Certified Commercial Applicator.***

***If you have further questions or need additional help, you may call our office at (804) 786-3798 or email [opsclrt.vdacs@vdacs.virginia.gov](mailto:opsclrt.vdacs@vdacs.virginia.gov).***