

**COMMISSIONER** 

## Florida Department of Agriculture and Consumer Services Division of Agricultural Environmental Services

## **NOTICE OF NONCOMPLIANCE**

Please Respond to:

Bureau of Inspection and Incident Response 3125 Conner Blvd., Suite N, Tallahassee, Florida 32399-1650

Rule 5E-14.1025, F.A.C. Telephone: (850) 617-7996 and FAX: (850) 617-7981

Issued to:		•	
	Name of individual(s)	, <u>C</u>	redential type and number
	Pest Control Company		
	Street Address or P.O. Box		
	City	State	Zip Code
This notice re Code, specif		e with Chapter 482, Florida Statutes, and Rule	e, Rule 5E-14, Florida Administrative
   	Section(s): 5E-14.103 FAC 5E-14.105 FAC 5E-14.142 FAC 5E-14.1421 FAC 5E-14.147 FAC 482.091(2)(c) FS 482.226(5) FS 482.227 FS	Pertaining to:  Licensee Identification – Vehicles, Equipment WDO Contractual Requirements Responsibilities and Duties - Records, Reports, Advertising Identification Card – Written training verification maintained by the Licensee for all ID Cardholders Notice of Pesticide Application Employee Identification Card WDO Contract - Notice of Treatment WDO Contract - Guarantee/Warranty/Disclaimers	
Inspector's	Observations: Date _		
Please revi	ew the noted statute or	rule above. You are hereby notified that y	you shall take the following action
		to	assure compliance within 21 day
Signature of Ir	ndividual	Date	
Inspector Sign	nature	Date	
Inspector Nan	me (please print)	Phone Number	