



REQUEST FOR CHANGE OF ADDRESS

(To be filed by licensee)

- Field Representative Active
 (employed by registered company)
- Operator Inactive
 (not currently employed by registered company)
- Applicator

FOR BOARD USE ONLY	
Effective Date	Checked by
License No.	

In accordance with Section 1911 of the California Code of Regulations, when a field representative/operator/applicator changes his/her address, the licensee shall notify the Structural Pest Control Board within ten days. There is no fee for a change of address. If you are currently employed by a registered company, do not send your license to the Board. If you are not currently employed by a registered company, you must return your license to the Board.

DO NOT RETURN YOUR POCKET LICENSE TO THE BOARD.

PLEASE PRINT OR TYPE

Name of Licensee (First) (Middle) (Last)	License Number(s)	
Residence Address	Telephone Number Area Code ()	
(City) (State) (Zip Code)		
Signature of Licensee	Date	
Please indicate which address you wish to use for mailing purposes. <input type="checkbox"/> Residence <input type="checkbox"/> Business		
Current Employer (if applicable)	Principal Registration Number	Employers Telephone Number Area Code ()
Principal Office Address		
(City) (State) (Zip Code)		