



Authorization Application (Individual) Instructions

Section 1: Authorization Type Applying For

- 1.1: Check the appropriate authorization type you are applying for.
- 1.2: Community Applicator Certifications are **ONLY** applicable to Community members and employees of the GRIC or its entities.
- 1.3: Community **CERTIFIED** Applicator Certifications and their respective categories, are **ONLY** applicable if you intend to apply Restricted Use Pesticides in Indian Country and are certified by the EPA to do so.
- 1.4: Select whether you are a New Applicant or Renewal Applicant. Renewal applications received later than 30 calendar days after the expiration date of your previous authorization are subject to the new application fee.

Section 2: General Information

- 2.1: Complete each field provided in its entirety as it applies to you.
- 2.2: If applying for a Community Applicator Certification or claiming fee exemption, enter your GRIC Tribal member ID number or GRIC / Enterprise employee ID badge number. Attach a copies to your application.
- 2.3: If applying for a Community Certified Applicator Certification, enter your Arizona Department of Agriculture (ADA) Certification number, **AND** your EPA Certification number. Attach copies to your application.
- 2.4: If applying for the Aerial Pest Control category, attach a copy of your Agricultural Aircraft Pilot License.
- 2.5: Information on how to obtain an EPA Federal Certification to apply RUPs in Indian Country can be found here: <https://www.epa.gov/pesticide-applicator-certification-indian-country>.

Section 3: Fees

- 3.1: Payment is accepted by check or money order and should be made out to **“GRIC Pesticide Fund”**.
- 3.2: Payment by CCARD can also be made at the GRIC’s Cashier’s Office. Contact (520) 562-9676. Inform the cashier that you are paying an authorization fee with the Pesticide Control Office and reference accounting code: **DEQ 35**.

Section 4: Acknowledgement & Consent

- 4.1: Read, sign and date the Acknowledgement & Consent.
- 4.2: Signatories must meet the requirements set forth in Section 18.318(A)(1) of the Pesticide Code.
- 4.3: Submission of your completed application, applicable photocopies and payment shall be remitted to:

GRIC Department of Environmental Quality
ATTN: Pesticide Control Office
PO Box 2139
Sacaton, AZ 85147



Authorization Application (Individual)

Section 1: Authorization Type Applying For

- Community Applicator Certification
- Community Certified Applicator Certification (RUPs) New Applicant Renewal Applicant
- | | | |
|---|--|---|
| <input type="checkbox"/> Agricultural Pest Control | <input type="checkbox"/> Aquatic Pest Control | <input type="checkbox"/> Regulatory Pest Control |
| <input type="checkbox"/> Forest Pest Control | <input type="checkbox"/> Right of Way Pest Control | <input type="checkbox"/> Public Health Pest Control |
| <input type="checkbox"/> Ornamental and Turf Pest Control | <input type="checkbox"/> Industrial and Institutional Pest Control | <input type="checkbox"/> Soil Fumigation |
| <input type="checkbox"/> Seed Treatment | <input type="checkbox"/> Demonstration and Research Pest Control | <input type="checkbox"/> Non-soil Fumigation |
| <input type="checkbox"/> Sodium Cyanide Predator Control | <input type="checkbox"/> Sodium Fluoroacetate Predator Control | <input type="checkbox"/> Aerial Pest Control |

ATTACH COPY

Section 2: General Information

Applicant's Name:		Employer:	
Mailing Address:	City:	State:	ZIP:
Physical Address:	City:	State:	ZIP:
Phone #:	Cell Phone #:	Email:	
ADA Certification #:	EPA Certification #:	GRIC Member ID #:	
ATTACH COPY	ATTACH COPY	ATTACH COPY	

Section 3: Fees

	New	Renewal
Community Certified Applicator Certification	\$25.00	\$15.00
Community Applicator Certification	EXEMPT	EXEMPT

Community departments and entities; Community member owned businesses; Community members; any governmental jurisdiction; as well as any person employed within, are exempt from all fees.



GILA RIVER INDIAN COMMUNITY
Department of Environmental Quality - Pesticide Control Office
 PO BOX 2139 • SACATON, AZ 85147 • OFFICE (520) 562-2234 • FAX (520) 562-3198
 GRIC.Pesticide.Office@GRIC.nsn.us



Section 4: Acknowledgement & Consent

I certify under penalty of law, that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering information, the information submitted is, to the best of my knowledge and belief, true, accurate, representative, and complete and was obtained in accordance with established written procedures. I am aware that there are significant consequences for submitting false information.

I understand that signing this application constitutes a consensual relationship and agree to be subject to the regulations and the compliance and enforcement provisions of Gila River Indian Community laws, including the Pesticide Ordinance.

By submitting this application, I affirm that I voluntarily consent to: The jurisdiction of the Gila River Indian Community and its regulatory authority for any and all activities authorized by this chapter, including the authority of the Department to conduct investigations of violations of this chapter; and I submit to the jurisdiction of the administrative law judge or the Community Court for the express purpose of enforcement of this chapter.

Furthermore, I acknowledge that I am in receipt of a copy of GR-004-22 and that I understand my duties and responsibilities as contained in GR-004-22 and any conditions imposed during the authorization process; and I understand that any person, including a person who is not an Indian, who knowingly violates any provision of GR-004-22 may be assessed a civil penalty; that any person subject to the criminal jurisdiction of the Community may also be subject to criminal prosecution; and that any person who is not a member of the Community may also be subject to removal or exclusion under Title 8, Chapter 1, of the GRIC Code.

Signature

Date

For Official Use Only

Date Received	Received By	Date Approved	Date Denied	Certification #