Texas Department of Agriculture (TDA) License Transfer Information Form

(For transferring individual association between pest control companies under TAC §7.142)

1. License Holder Information

Full Name: _____
TDA License Number: _____

License Type (Apprentice / Technician / Certified Applicator):

_____
License Category (if applicable): _____

Driver's License # and State: _____
Social Security Number: ____ – ____ – _____

Email Address: _____
Phone Number: _____

2. Previous Employer Information

Business Name: _____
TPCL Number: _____

Address: _____
City / State / ZIP: _____

Responsible Certified Applicator (RCA): _____
Date of Separation: ____ / ____ / _____

■ I confirm my previous employer has been notified of my intent to transfer.

3. Transfer Details

Effective Transfer Date: ____ / ____ / _____

Reason for Transfer: ■ Employment Change ■ Company Sale/Acquisition ■ Other:

_____

Additional Notes or Comments:

_____
___
_____
___
_____
___

4. Attestations

Licensee Statement:
I certify that the above information is true and correct, and that I will not perform pest control work for a new employer until this transfer is officially processed and approved by the Texas Department of Agriculture.

Signature of License Holder: _____ Date: ____ / ____ / _____

Receiving Company Authorization:
I certify that I am the Responsible Certified Applicator or authorized agent of the company accepting this license transfer and that the above-named individual is now employed or contracted under our TPCL.

Signature (RCA or Authorized Officer): _____ Date: ____ / ____ / _____

Please retain a copy of this completed form for your records. Submit original to the Texas Department of Agriculture - Structural Pest Control Service.