

APPLICATION FOR PRESCRIBED MATERIALS APPLICATION BUSINESS LICENCE

Environmental Management Branch

**Note: Original signatures are required. Please type or print clearly in ink.
Please complete the application form and submit by mail or in person. DO NOT FAX.
Signature and contact information are on page two.**

<input type="checkbox"/> Application for new licence	<input type="checkbox"/> Application for renewed licence	Current licence Number (if applicable):
Section 1 – Applicant and Company Information		
Applicant Name:		
Mailing Address (include 911, RR#):		
City/Town:	Region/County:	
Province:	Postal Code:	
Tel:	Fax:	E-mail:
Company Name (for which you are an authorized agent)*:	Company Contact:	
	Company Telephone:	
	Company Fax:	
<p>* Note: You will need to notify OMAFRA in writing if you:</p> <ul style="list-style-type: none"> • cease to be this company’s authorized agent • are hired by another company to be their authorized agent. You will also need to include company information. 		
<input type="checkbox"/> I have an ongoing day-to-day involvement/knowledge with the above company’s land application practices		
Section 2 – Requirements for Licencing		
Courses	Location/Date	
<input type="checkbox"/> Prescribed Materials Application Business Licence Course		
Exam:		
Exam Date:	Exam Location:	Grade Received:
<p>Additional Information Personal information is collected under the authority of the Nutrient Management Act, 2002, s. 32. The information will be collected and used by the Ministry or their agents for: a) the support of certification and licensing program under the Nutrient Management Act, 2002, including future communications, research, training, certification, program development, plan approvals, monitoring and compliance, and b) will be added to an informational database. For information, contact the Agricultural Information Contact Centre, Ministry of Agriculture, Food and Rural Affairs, 1-866-242-4460 or nman.omafra@ontario.ca. Note: In the future, the certification and registration registry may be maintained by a third party service provider.</p>		
<input type="checkbox"/> Yes, I would like my name made publicly available through OMAFRA (e.g. OMAFRA website, regional distribution, written publications, information centre requests, etc).		
<input type="checkbox"/> Yes, I would like my company’s name made publicly available through OMAFRA (e.g. OMAFRA website, regional distribution, written publications, information centre requests, etc).		

Section 3 – Signature

Declaration

I hereby declare that, to the best of my knowledge, all information I have provided in this form is complete and accurate. I further hereby declare that I have completed the training and testing requirements as required to obtain the Prescribed Materials Application Business Licence.

Name (print): _____ Applicant's Signature: _____

Date: _____

Applications must be submitted to:

Ministry of Agriculture, Food and Rural Affairs
Environmental Management Branch
Training, Education and Communications Unit
3rd Floor SW
1 Stone Road West
Guelph, Ontario N1G 4Y2
Tel: 1-866-242-4460

