



ARKANSAS ENERGY & ENVIRONMENT

Pest Management Area with
Automatic Coverage for
Pesticide Application Under
APC&EC Rule 6.206 &
Pesticide General Permit ARG870000

Notice of Coverage

The following information is posted in compliance with APC&EC Rule 6.206 and General Permit ARG870000. A copy of this NOC must be posted at the pest management area or kept at the physical address of the permittee prior to commencing the pesticide application.

Contact Name:	
Phone Number:	
Email Address:	
Project Description: (e.g. City Name Mosquito Control)	
Start Date:	
Approximate End Date:	

I, _____ (Typed or printed name of person completing this certification) certify under penalty of law that I have read and understand the eligibility requirements for claiming an authorization under APC&EC Rule 6.206 and General Permit ARG870000. Pesticides will be handled, used, and applied in accordance with state laws, rules, and regulations and the Federal Insecticide, Fungicide, and Rodenticide Act (FIFRA), which includes all instructions on the pesticide label. 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 gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Signature

Title

Date