

Applying for the Commercial Certification or Private Certification After Passing Your Exam

Pesticide Program

Division of Crop & Pest Services

Mass. Department of Agricultural
Resources

Compatible Equipment and Web Browsers

- Please also be sure that you are using a regular computer (Windows 10+ / MacOS 10.11+ computer or laptop) with MS Edge or Chrome web browser.
- All instructions were written, and screenshots based on Windows 10 and MS Edge browser—other browsers may be different or incompatible.
- Chromebooks are not 100% compatible with the EEA ePLACE Portal and users may find it difficult to upload documents, proof of insurance, etc..
- Mobile devices; such as, iPhone, iPad, Android phone or tablets, etc. are NOT compatible with the EEA ePLACE Portal.

No Chromebooks, smartphones or tablets!



Receive Technical Assistance

- **Need Help?** For technical assistance in using this web application, please call the ePLACE Help Desk Team at [\(844\) 733-7522](tel:8447337522) or (844) 73-ePLAC between the hours of 7:30 AM-5:00 PM Monday-Friday, with the exception of all Commonwealth and Federally observed holidays. If you prefer, you can also e-mail us at ePLACE_helpdesk@state.ma.us. For assistance with non-technical questions, please contact the issuing Agency directly using the links below.

Return to the Main Login Page

[Home](#)

Welcome to the Commonwealth of Massachusetts ePLACE Portal

The Commonwealth of Massachusetts is pleased to offer online access to many licensing, permitting and certificate services. With ePLACE, the Commonwealth hopes to deliver more efficient, convenient, and interactive e-government services.

Options for Licensees and Applicants:

- Apply for, Renew, or Amend a License, Permit, Certificate or Notification
- Make Payments Online

ePLACE Portal Account Registration:

In order to utilize most of the services available through the ePLACE, you must first register for an account. Registration is required to do any of the following:

- Apply for a License, Permit, Certificate or Notification
- Renew a License, Permit or Certificate
- Track the Status of Applications
- Review and Update Applications, Permitting and/or Certificate Information

First Time Users:

To register, [click here](#) create an account with a User name and Password. After registering, login to access ePLACE.

Returning Users:

Use the log in box on the right to log in with your User name and Password to access the portal. *NOTE If it has been more than 60 days since you last logged into the system you will need to reset your password.

If you are using assistive tools such as JAWS, please check our FAQs for important information. [EEA ePlace Quick Guides](#).

Login

User Name or E-mail:

Password:

[Login »](#)

☐ Remember me on this computer

[I've forgotten my password](#)
[New Users: Register for an Account](#)

Please note: At this time, the ePLACE Portal services only some (not all) licenses, permits and certificates issued by Energy and Environmental Affairs (EEA). It does not service any other type of license, permit or certificates that is issued or approved by the Commonwealth or any of its agencies or municipalities. ePLACE does not service any federal licenses or permits.

Enter Security Question Answer

Home

Security Question Verification

Below is a security question you answered when you first registered. Please provide your security answer so we can verify your identity.

Security Question:

What is your favorite color?

*Security Answer:

Red

Continue

Return to Login

Click Continue

You must answer one of your security questions in the box below. The answers are case-sensitive!

Home Page Upon Login



An Official website of the Commonwealth of Massachusetts

eLicensing and ePermitting Portal

ePLACE home page after successfully logging into your account

[Announcements](#) [Logged in as: Johnny Apple Seed](#) [Accessibility Support](#) [Account Management](#) [Logout](#)

Need Help? For technical assistance in using this web application, please call the ePLACE Help Desk Team at (844) 733-7522 or (844) 73-ePLAC between the hours of 7:30 AM-5:00 PM Monday-Friday, with the exception of all Commonwealth and Federally observed holidays. If you prefer, you can also e-mail us at ePLACE_helpdesk@state.ma.us. For assistance with non-technical questions, please contact the issuing Agency directly using the links below.

Contact:
[Energy and Environmental Affairs, MASSDEP](#)
[Energy and Environmental Affairs, MDAR](#)

Convenience Fee: Please note there will be a convenience fee for all online credit card transactions. There is also a nominal fee for online payment by check.

Home

Dashboard

My Records

My Account

Welcome Johnny Apple Seed

You are now logged in to the Commonwealth's eLicensing and ePlace Portal.

What would you like to do?

- [File an Online Application](#)
- Renew a License, Permit or Certificate (select "My Records" above)
- Amend License, Permit or Certificate Information (select "My Records" above)

Please note: At this time, the ePLACE Portal services only some (not all) licenses, permits and certificates issued by Energy and Environmental Affairs(EEA). It does not service any other type of license or permit that is issued or approved by the Commonwealth or any of its agencies or municipalities. This Portal will not service any federal licenses or permits.

If you are using assistive tools such as JAWS, please check our FAQs for important information. [EEA ePlace Quick Guides](#)

For additional information about the Commonwealth, please visit the [Mass.gov](#) portal. For EEA information, please visit the [Mass.gov/EEA](#) portal.

File an Online Application

After completing the login and security question for your newly created account, you may now apply for an exam, link your existing pesticide records, renew your credential, or update your account information—including, employer information, insurance information, etc.

Apply for the License

The screenshot shows the ePlace Portal interface. At the top, there is a navigation bar with a 'Home' button on the left and three buttons ('Dashboard', 'My Records', 'My Account') in the center. A red arrow points from the text '1 - Click Home' to the 'Home' button. To the right of the navigation bar, the text '2 - Click File an Online Application' is displayed. A large red arrow points from this text down to a blue button labeled 'File an Online Application' on the right side of the page. The main content area on the left contains a welcome message for Steven Kenyon, a list of actions (including 'File an Online Application'), and some informational text.

Home ← **1 - Click Home**

2 - Click File an Online Application

File an Online Application

Welcome Steven Kenyon
You are now logged in to the Commonwealth's eLicensing and ePlace Portal.

What would you like to do?

- [File an Online Application](#)
- Renew a License, Permit or Certificate (select "My Records" above)
- Amend License, Permit or Certificate Information (select "My Records" above)

Please note: At this time, the ePLACE Portal services only some (not all) licenses, permits and certificates issued by Energy and Environmental Affairs (EEA). It does not service any other type of license or permit that is issued or approved by the Commonwealth or any of its agencies or municipalities. This Portal will not service any federal licenses or permits.

If you are using assistive tools such as JAWS, please check our FAQs for important information. [EEA ePlace Quick Guides](#)

For additional information about the Commonwealth, please visit the [Mass.gov](#) portal. For EEA information, please visit the [Mass.gov/EEA](#) portal.

Accept the Terms and Conditions

Home

Account Registration

You must provide the following information to open an account:

- User Name and Password
- Contact Information
- E-mail

Please review and accept the terms below to proceed.

In order to perform licensing and permitting transactions online, you were required to register for the eLicensing and ePermitting Portal. All registered users of the eLicensing and ePermitting Portal are required to agree to the following:

1. Use of the Commonwealth of Massachusetts eLicensing and ePermitting Portal is subject to federal and state laws, which may be amended from time to time, including laws governing unauthorized access to computer systems. Online inquiries and transactions create electronic records that in some instances might

☒ I have read and accepted the above terms.

Continue Registration »

**Accept the terms and conditions &
Click "Continue Registration"**

Apply for MDAR Authorization

Commonwealth of Massachusetts EEA ePLACE (ePermitting) Online Services

New Applicants:

The Commonwealth of Massachusetts EEA ePLACE (ePermitting) portal provides the ability to file applications for licenses, permits, certificates, notifications and registrations. From the listing below, please click on the appropriate link to expand the options, select the service that you would like to use and click the continue button.

Existing Applicants:

Click Home and use the "My Records" tab to renew or amend a license, permit, certification or registration. If they are not listed under the "My Records" tab, please select the "Link your account" option found in section below. You will be prompted for a "record identification code" and "authorization code." from the Account Link notification you received. If you have not received a notification letter, please contact the ePLACE Help Desk Team at (844) 733-7522 or (844) 73-ePLACE between the hours of 7:30 AM - 5:00 PM Monday-Friday.



Search

- ▶ Apply for a DCR Authorization - Construction and Vehicle Access Permits
- ▶ Apply for a DCR Authorization - Special Use Permits
- ▶ Apply for a DEP Authorization - Air Quality (AQ)
- ▶ Apply for a DEP Authorization - Drinking Water (DW)
- ▶ Apply for a DEP Authorization - Hazardous Waste (HW)
- ▶ Apply for a DEP Authorization - NPDES (WM)
- ▶ Apply for a DEP Authorization - Solid Waste (SW)
- ▶ Apply for a DEP Authorization - Watershed Management (WM)
- ▶ Apply for a DEP Authorization - Waterways Chapter 91 (WW)
- ▶ Apply for a DEP Authorization - Toxic Use Reduction (TUR)

- ▶ ☒ Apply for a MDAR Authorization
 - ☐ MDAR - Massachusetts Pesticide Exam Application
 - ☒ MDAR - Massachusetts Pesticide License Application
 - ☐ MDAR - Massachusetts Pesticide Product Registration Application

- ▶ Apply for an EEA General Request
- ▶ Link Your Account

Click on the bullet to expand the list and select "MDAR - Massachusetts Pesticide License Application"

MDAR is the Massachusetts Department of Agricultural Resources

Continue »

Click Continue

Select Pesticide Program Options and Select License Application

Home

MDAR Applications

Select a Record Type

Choose one of the following available record types. For assistance or to apply for a record type not listed below please contact us.



Search

▼ Pesticide Program Options

- ☐ MDAR - Massachusetts Pesticide Exam Application
- ☒ MDAR - Massachusetts Pesticide License Application
- ☐ MDAR - Massachusetts Pesticide Product Registration Application



Continue Application »

Enter Exam Reference ID Number

Step 1: Application Information > Page 1 of 3

To apply for a license, enter your Exam Reference Number in the box below.
You can find your Exam Reference Number in the confirmation email you received along with your passing score (OR)
Please Click Home --> My Records, and copy the Exam Record ID that corresponds to your Exam/License category and start a new Pesticide License application.


* indicates a required field.

Exam Information

Please enter the Exam Record Number or Exam Reference I.D. Number in the box below. Please make sure to remove any extra spaces.

* Exam Reference Number:

20-EXAM-1410|



Enter your specific
Exam Reference Number

Continue Application »

Save and resume later

Review License Type and Category

Home

MDAR Applications

MDAR - Massachusetts Pesticide License Application

1 Application Information	2 Documents	3 Applicant and Contributors	4 Review	5 Record Submitted
---------------------------	-------------	------------------------------	----------	--------------------

Step 1: Application Information > Page 2 of 3

* indicates a required field.

License Type

* License Type:

Commercial Certification

License Category: *

General Pest Control (41)



**Review you information
and Continue Application**

Continue Application »

Save and resume later

Enter Current License Information for Commercial Certification Applicants

Home The below steps are not applicable to those seeking Private Certification

MDAR Applications

MDAR - Massachusetts Pesticide License Application

1 Application Information	2 Documents	3 Contact Information	4 Review	5 Record Submitted
---------------------------	-------------	-----------------------	----------	--------------------

Step 1: Application Information > Page 3 of 3

If you are making pesticide applications in your capacity as a government employee, please upload your Government Employee Letter.

If you are making pesticide applications outside of your role as a government employee, please upload your Proof of Insurance.

* indicates a required field.

Additional Information

Massachusetts Pesticide License Number: ⓘ
CC-00XXXXX

If you have only an Applicator (core) License (AL), then enter your AL number here. If the system has already issued you a Commercial Certification (CC) Number, then you must enter your CC Number here.

* Are you making pesticide applications in your capacity as a government employee?:
☐ Yes ☒ No

Current Insurance Carrier: *
[Text Field]

Insurance Expiration Date: * ⓘ
[Text Field] ⓘ

Enter your liability insurance information here from your Certificate of Insurance (COI).


Continue Application »

Save and resume later

Upload Insurance or Proof of Government Employee Letter

- Proof of insurance is required for pesticide applicators seeking a new commercial license or to renew their existing commercial license
- The Certificate of Insurance (COI) can be obtained through your employer or via your insurance agent
- Proof of insurance is NOT applicable to Private Certification Applicants

Sample COI

CERTIFICATE OF LIABILITY INSURANCE					DATE: 01/01/2018	
PRODUCER Name address and Phone Insurance Agent Phone:			THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.			
INSURED Name and Address Company Insured			INSURERS AFFORDING COVERAGE INSURER A: INSURER B: INSURER C: INSURER D: INSURER E:		NAIC # 	
COVERAGES THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.						
LINE	INSR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A		GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> GENL AGGREGATE LIMIT APPLIES PER POLICY <input type="checkbox"/> PROD <input type="checkbox"/> LOC		07/01/17	07/01/18	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (EA OCCUR) \$ 500,000 MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMPROP AGG \$ 2,000,000
A		AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input checked="" type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS		07/01/17	07/01/18	COMBINED SINGLE LIMIT (EA ACCIDENT) \$ 1,000,000 BODILY INJURY \$ BODILY INJURY \$ PROPERTY DAMAGE \$ UTD ONLY - EA ACCIDENT \$ UTD ONLY - EA ACC \$ UTD ONLY - AGG \$ EACH OCCURRENCE \$ 2,000,000 AGGREGATE \$ 2,000,000
A		EXCESS/UMBRELLA LIABILITY <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS <input type="checkbox"/> DEDUCTIBLE \$10,000 <input checked="" type="checkbox"/> RETENTION \$10,000				EACH OCCURRENCE \$ 2,000,000 AGGREGATE \$ 2,000,000
B		WORKERS COMPENSATION AND EMPLOYERS LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (See schedule code SPECIAL PROVISIONS below)		07/01/17	07/01/18	E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000
A		Contractors Equip Limited Pollution		07/01/17	07/01/18	LIMIT \$139,322 Limit \$100,000
ENDORSEMENTS OR OTHER SPECIAL PROVISIONS: POLICIES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS						
CERTIFICATE HOLDER DEPAT03 Department of Agriculture Resource Steve Kenyon 251 Causeway St., Suite 500 Boston MA 02114			CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES. AUTHORIZED  Agent Signature			

page 1

Proof of Government Employment (PGE)

- Federal, State, and Municipal government employees follow a similar process but are required to upload a “Proof of Government Employee Letter”
- The letter must be on Agency letterhead and clearly indicate that such license is being used for government work only
- Pesticide applications made outside of one's government job to the property of another require a separate Certificate of Insurance (COI)

Sample PGE Letter

THE COMMONWEALTH OF MASSACHUSETTS
EXECUTIVE OFFICE OF ENERGY AND ENVIRONMENTAL AFFAIRS



CHARLES D. BAKER
Governor

KARYN E. POLITO
Lt. Governor

MATTHEW A. BEATON
Secretary

JOHN LEBEAUX
Commissioner

[Insert Date]

Massachusetts Department of Agricultural Resources
Pesticide Program – Attn: Licensing
251 Causeway ST; Suite 500
Boston, MA 02114

RE: Payments and Insurance Requirements

Dear Sir/Madam:

Attached please find the completed payment and signed [Insert License Application(s) or License Renewal Form(s)].

Please note that this/these individual(s), whose names are listed below, are employees of the [Insert Federal/State/City/Town Agency Name]. As per State Pesticide Regulations, 333 CMR 10.13(8), they are exempt from the Financial Responsibility (insurance requirements), when their pesticide applicator activities are part of their duties as governmental employees when they are working in their governmental capacity.

- John Doe, License Number [Insert Number]; and
- Jane Doe, License Number [Insert Number].

Please contact me if you have any questions.

Sincerely,

[Name of Program Coordinator], [Title]
Enclosures [Insert Number]
[email and phone number]

Sign Attestation and Add COI or PGE

[Home](#)

MDAR Applications

MDAR - Massachusetts Pesticide License Application

1 Application Information

2 Documents

3 Applicant and Contributors

4 Review

5 Record Submitted

Step 2 : Documents > Page 1

* indicates a required field.

List of Documents

Documents:

Please upload Required Document(s) which are mandatory to submit this Application:

1. Proof of Insurance

Attestation: *

I hereby acknowledge and understand that my application shall not be considered complete unless and until an attestation by an insurance broker certifying that insurance policy coverage in force and issued on my behalf meets or exceeds the standards set forth in 333 CMR 10.13, unless otherwise exempt or waived in accordance with M.G.L. c. 132B and 333 CMR 10.00 et seq.

*I have read and agree with the above attestation:

☐

Date: *

You must check the attestation box and select the date!

Attachment

When uploading file document(s) the maximum file size allowed is 50 MB.
The 'File Name' (including file extension) MUST NOT exceed 75 characters in length.
The document 'Description' MUST NOT exceed 50 characters in length.
Documents that exceed any of these limits will be removed by the system, and cannot be retrieved, which may delay the review process.

Name	Type	Size	Latest Update	Action
No records found.				

Add

Select Add to begin the Upload!

Continue Application »

Save and resume later

Select Add

Step 2: Documents > Page 1 * indicates a required field.

List of Documents

Documents: ?

Please upload Required Document(s) which are mandatory to submit this Application:

1. Proof of Insurance

Attestation: *

I hereby acknowledge and understand that my application shall not be considered complete unless and until an attestation by an insurance broker certifies that the application meets the standards set forth in 333 CMR 10.00 et seq.

*I have read and agree to the terms and conditions of the application. ☒

Date: *
09/26/2017

Attachment

When uploading file documents the maximum file size allowed is 50 MB.
The 'File Name' (including file extension) MUST NOT exceed 75 characters in length.
The document 'Description' MUST NOT exceed 50 characters in length.
Documents that exceed any of these limits will be removed by the system, and cannot be retrieved, which may delay the review process.

Name	Type
No records found.	

[Add](#)

[Continue Application »](#) [Save and resume later](#)

File Upload ×

When uploading file document(s) the maximum file size allowed is 50 MB.
The 'File Name' (including file extension) MUST NOT exceed 75 characters in length.
The document 'Description' MUST NOT exceed 50 characters in length.
Documents that exceed any of these limits will be removed by the system, and cannot be retrieved, which may delay the review process.

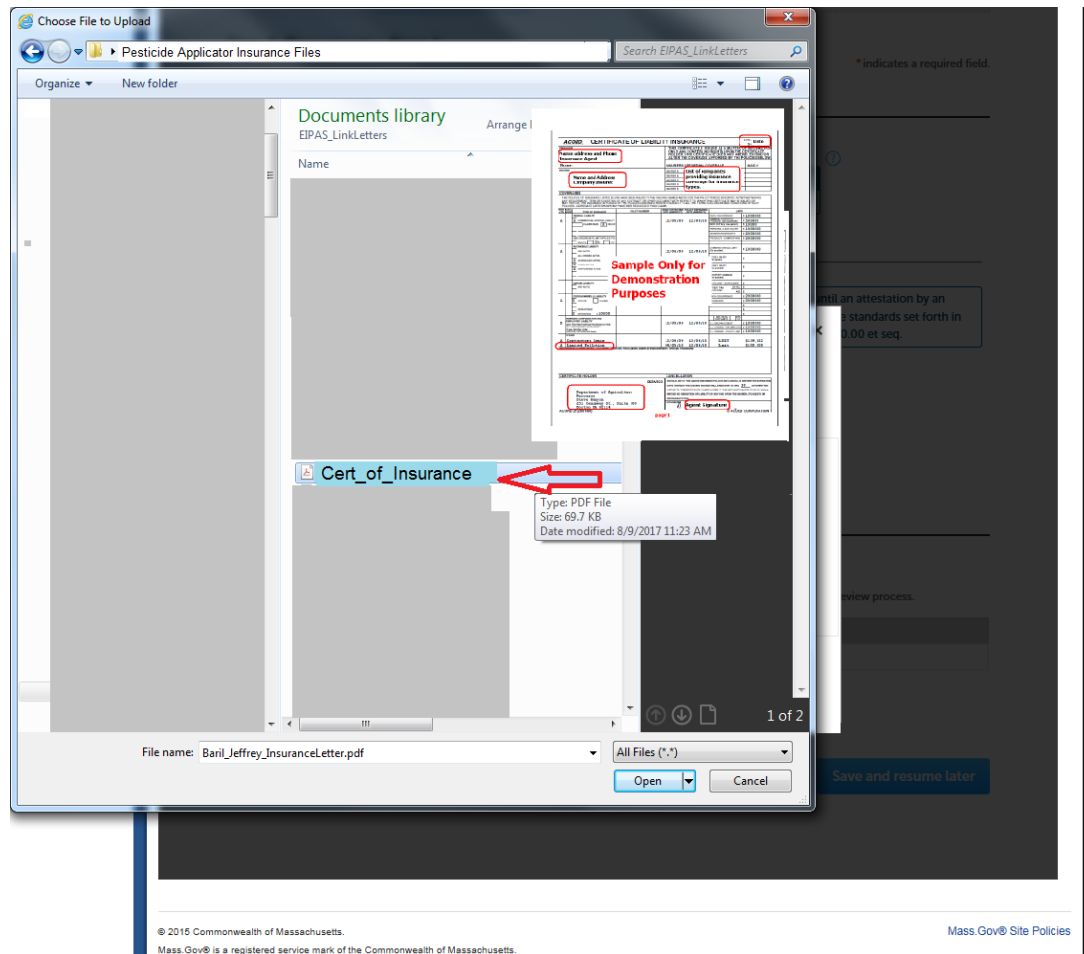
Click Add

[Continue](#) [Add](#) [Remove All](#) [Cancel](#)

© 2015 Commonwealth of Massachusetts.
Mass.Gov® is a registered service mark of the Commonwealth of Massachusetts.

Mass.Gov® Site Policies

Locate File on Computer



Continue

Step 2: Documents > Page 1 * indicates a required field.

List of Documents

Documents:

Please upload Required Document(s) which are mandatory to submit this Application:

1. Proof of Insurance

Attestation: *

I hereby acknowledge and understand that my application shall not be considered complete unless and until an attestation by an insurance broker certifies that the application complies with the standards set forth in 333 CMR 10.00 et seq.

*I have read and agree ☒

Date: *
09/26/2017

Attachment

When uploading file documents:
The File Name (including file extension) MUST NOT exceed 75 characters in length.
The document 'Description' MUST NOT exceed 50 characters in length.
Documents that exceed any of these limits will be removed by the system, and cannot be retrieved, which may delay the review process.

Name	Type
No records found.	

File Upload ×

When uploading file document(s) the maximum file size allowed is 50 MB.
The File Name (including file extension) MUST NOT exceed 75 characters in length.
The document 'Description' MUST NOT exceed 50 characters in length.
Documents that exceed any of these limits will be removed by the system, and cannot be retrieved, which may delay the review process.

MDAR_Insurance_Doc.PDF 100%

After adding the COI or PGE Letter, Select Continue

Continue **Add** **Remove All** **Cancel**

Continue

Continue Application > **Save and resume later**

Select Type and Enter Description

I hereby acknowledge and understand that my application shall not be considered complete unless and until an attestation by an insurance broker certifying that insurance policy coverage in force and issued on my behalf meets or exceeds the standards set forth in 333 CMR 10.13, unless otherwise exempt or waived in accordance with M.G.L. c. 132B and 333 CMR 10.00 et seq.

*I have read and agree with the above attestation:

☒

Date: *
09/26/2017

Attachment

When uploading file document(s) the maximum file size allowed is 50 MB.
The File Name (including file extension) MUST NOT exceed 75 characters in length.
The document 'Description' MUST NOT exceed 50 characters in length.
Documents that exceed any of these limits will be removed by the system, and cannot be retrieved, which may delay the review process.

Name	Type	Size	Latest Update	Action
No records found.				

*Type: Remove
Proof of Insurance

File:
Cert_of_Insurance
100%

*Description (Maximum 50 characters):
My Pesticide License Proof of Insurance
Note: A description is required, but no more than 50-characters!

Save Add Remove All


Continue Application » Save and resume later

Save your work!


© 2015 Commonwealth of Massachusetts.
Mass.Gov® is a registered service mark of the Commonwealth of Massachusetts.

Mass.Gov® Site Policies

Success! Now Continue Application



The attachment(s) has/have been successfully uploaded.
It may take a few minutes before changes are reflected.



Process completed Successfully!

MDAR - Massachusetts Pesticide License Application

1 Application Information

2 Documents

3 Applicant and Contributors


4 Review

5 Record Submitted

Step 2 : Documents > Page 1

* indicates a required field.

List of Documents

Documents: 

Please upload Required Document(s) which are mandatory to submit this Application:

1. Proof of Insurance


Attestation: *

I hereby acknowledge and understand that my application shall not be considered complete unless and until an attestation by an insurance broker certifying that insurance policy coverage in force and issued on my behalf meets or exceeds the standards set forth in 333 CMR 10.13, unless otherwise exempt or waived in accordance with M.G.L. c. 132B and 333 CMR 10.00 et seq.

*I have read and agree with the above attestation:

☒

Date: *


09/26/2017 

Attachment

When uploading file document(s) the maximum file size allowed is 50 MB.
The 'File Name' (including file extension) MUST NOT exceed 75 characters in length.
The document 'Description' MUST NOT exceed 50 characters in length.
Documents that exceed any of these limits will be removed by the system, and cannot be retrieved, which may delay the review process.

Name	Type	Size	Latest Update	Action
Baril_Jeffrey_InsuranceLetter.pdf	Proof of Insurance	69.73 KB	Pending	

Add

Continue Application »  **Continue the Application!**

Save and resume later

Applicant and Contributors

Step 3: Applicant and Contributors > Page 1

* indicates a required field.

Employer Information

Please enter your employer information by clicking the "Add New" button below. If you own/operate your own business, please enter your business contact information.

Add New

Showing 1-1 of 1

Contact Type	Full Name	Company/Employer Name	Phone	E-mail	Action
Employer Information		Self Employed	999-999-9999	steve.kenyon2@mass.gov	Edit Delete

Applicant Information

To View your contact, click the View link.

Applicant Information:

Steve Kenyon

1 Winter St
Boston, MA, 02118

Telephone #: 123-123-1234 Email: Steve.Kenyon2@mass.gov

[View](#) or [Edit](#)

Continue Application »

Save and resume later

Edit Employer / Company Information

Employer Information

Showing 1-1 of 1

Contact Type	Full Name	Company/Employer Name	Phone	E-mail	Action
Employer Information		Self Employed	999-999-9999	steve.kenyon2@mass.gov	Edit



Edit Your Employer Information as needed.

Applicant Information

Individual
Steve Kenyon
1 Winter St
Boston, MA, 02118

Telephone #:123-123-1234
E-mail:Steve.Kenyon2@mass.gov

In accordance with M.G.L. c. 62C, Section 49A, I certify under the penalties of perjury that I have complied with all laws of the Commonwealth of Massachusetts relating to taxes, reporting of employees and contractors, and withholding and remitting of child support.

I further acknowledge that by submitting this application I am consenting to the release of tax and child support data to the Massachusetts Department of Agricultural to the extent necessary to confirm my adherence to the tax and child support laws of the Commonwealth of Massachusetts in accordance with M.G.L. c. 62C, Section 49A.

☐ I have read and agree with the above attestation.

Date:

[Continue Application »](#)

[Save and resume later](#)

Review and Certification

Step 4: Review

[Continue Application »](#)

[Save and resume later](#)

Click the "Edit Application" button to make changes, if needed; otherwise, click the "attestation" button indicating that you have read and agree with the attestation and then click the "Continue Application" button.

Review and Certification

[Edit Application](#)

Exam Information

Exam Reference Number:

20-EXAM-1410

License Type

License Type:

Commercial Certification

License Category:

General Pest Control (41)

Review and Certification

Employer Information

Showing 1-1 of 1

Contact Type	Full Name	Company/Employer Name	Phone	E-mail	Action
Employer Information		Self Employed	999-999-9999	steve.kenyon2@mass.gov	Edit

Applicant Information

Individual
Steve Kenyon
1 Winter St
Boston, MA, 02118

Telephone #:123-123-1234
E-mail:Steve.Kenyon2@mass.gov

In accordance with M.G.L. c. 62C, Section 49A, I certify under the penalties of perjury that I have complied with all laws of the Commonwealth of Massachusetts relating to taxes, reporting of employees and contractors, and withholding and remitting of child support.

I further acknowledge that by submitting this application I am consenting to the release of tax and child support data to the Massachusetts Department of Agricultural to the extent necessary to confirm my adherence to the tax and child support laws of the Commonwealth of Massachusetts in accordance with M.G.L. c. 62C, Section 49A.

☐ I have read and agree with the above attestation.

Date:

[Continue Application »](#)

[Save and resume later](#)

Choose Payment Method

Step 5: Pay Fees

Listed below is the fee for the authorization that you are applying for. The following screen will display your total fees.

Payment may be made by electronic check or credit card for a nominal processing fee. The electronic check fee is \$0.35 per transaction. Credit card payments are 2.35% per transaction. Clicking on the PAY ONLINE button will bring you to the secure online payments portal. Once you have made payment, you will be returned to your application for submittal.

Payment may also be made by mail. However, review of your application will not begin until payment is received. By clicking on the Pay by Mail button, you will have submitted your application. You will receive a notification email with the location and address to send your payment. That information is also available in the instructions for this authorization.

Application Fees

Fees	Amount
Commercial License	\$150.00

Fastest and Easiest



\$150.00

Pay Online »

Pay by Mail»

Paying Online via nCourt Portal

Payment

You have elected to pay for the following item(s).

Description	ID	Amount
MDAR/Pesticide/Pesticide Credential/Application	20TMP-012444	\$150.00
		\$150.00

Total Amount Due: \$153.53

Billing Information

First Name
steve

Last Name
kenyon

Street
251 Causeway ST

City
Boston

State/Territory
Massachusetts

Zip
02114

Phone Number
(999) 999-9999

Email
steve.kenyon2@mass.gov

Confirm Email
steve.kenyon2@mass.gov

Payment Information

☐ Credit/Debit Card ☒ Electronic Check/ACH

Card Type
American Express

Card Number
TEST MODE

CVV Code
123

Expiration
01 2023

Check to accept both the Commonwealth of Massachusetts and nCourt Terms Agreements.
☒ I Accept

[Back](#)

Please Verify above information before the Submit Payment Button is pressed. Do not click Submit Payment button more than one time.

[Submit Payment](#)

Review “My Records”

Home

DashboardMy RecordsMy Account

If you chose to "Pay by Mail" than you will see that the Status is "Payment Pending"

An online payment is still possible by clicking the blue hyperlink "Pay Fees Due"

▼ MDAR

Showing 1-2 of 2 | [Download results](#) | [Add to collection](#)

<input type="checkbox"/>	Date	Identifying Number	Record Type	Project Name	Expiration Date	Status	Action
<input type="checkbox"/>	09/26/2017	17-PLIC-000012-APP	MDAR - Massachusetts Pesticide License Application	Applicator (Core) License		Payment Pending	Pay Fees Due
<input type="checkbox"/>	09/08/2017	17-EXAM-000031	MDAR - Massachusetts Pesticide Exam Application	Applicator (Core) License		License Application Submitted	

See the Exam Registraton Application -- filed on 09/08/2017

See the Applicator License (core) Application -- filed on 09/26/2017

Payment Complete

Step 6 : Record Issuance



Successfully Completed.

**Thank you for using our online services for your submission.
Your Record Number is 20-PLIC-0521-APP.**

Please note that you will be receiving email notifications for your submission and the progress of your application. If you did not receive a confirmation email for your submission please contact the HelpDesk service, contact information provided above.

If you need to start a new application, please click Home Button.

Click Home and See Your Records

After Clicking the "Home" button and then "My Records" you see your Exam Record "Status" has changed from "Passed" to "License Application Submitted" and you have a new License Application Record.

▼ MDAR

Showing 1-10 of 23 | [Download results](#) | [Add to collection](#)

<input type="checkbox"/>	Date	Record Number	Record Type	Category	Expiration Date	Status	Action
<input type="checkbox"/>	09/30/2020	20-EXAM-1410	MDAR - Massachusetts Pesticide Exam Application	Commercial Certification - General Pest Control (41)		License Application Submitted	
<input type="checkbox"/>	09/30/2020	20-PLIC-0521-APP	MDAR - Massachusetts Pesticide License Application	Commercial Certification - General Pest Control (41)		In Review	

Application was successfully submitted and is now under review by MDAR Staff.

Wait for MDAR Review

- Even if you made an “Online Payment” via credit card or checking, the MDAR is required to review and approve each new license application or renewal application.
- Please be patient as this may take a day or two and more if submitted during the busy annual renewal season.

Receive License Letter via Email

- Once your license application or renewal application has been approved you will receive an email from the ePLACE Portal with your License Letter attached.
- Please print the attached license letter and keep it on your person when using pesticides.
- Save the email with attachment for future use should you need another copy of your license.

Receive Technical Assistance

- **Need Help?** For technical assistance in using this web application, please call the ePLACE Help Desk Team at [\(844\) 733-7522](tel:8447337522) or (844) 73-ePLAC between the hours of 7:30 AM-5:00 PM Monday-Friday, with the exception of all Commonwealth and Federally observed holidays. If you prefer, you can also e-mail us at ePLACE_helpdesk@state.ma.us. For assistance with non-technical questions, please contact the issuing Agency directly using the links below.

Thank You

- Additional Questions?
 - Contact the Pesticide Program Exam and Licensing Team:
 - Voice Mail: (508) 281-6787
 - Email: pestexamlicense@mass.gov