



Eli D. Cabrera  
Administrator

Commonwealth of the Northern Mariana Islands  
OFFICE OF THE GOVERNOR  
Bureau of Environmental and Coastal Quality  
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Ray S. Masga  
DEQ Director

## Pesticide Use Permit Application For Other Pesticide Treatment

In the event that DEQ is not able to conduct routine inspections where restricted use pesticides or general use pesticides are regularly applied, such as in remote locations, the establishment may be required to submit a Pesticide Use Permit Application for Other Pesticide Treatment to the Director on a form provided for that purpose, accompanied by a non-refundable fee of fifty dollars.

The request for a permit must be submitted to BECQ at least twenty (20) business days prior to the proposed date of application. Upon receipt of Pesticide Use Permit Application for Other Pesticide Treatment, BECQ has up to ten (10) business days to process the permit. The permit is valid for six (6) months after the date of issuance.

The applicator is required to notify BECQ in writing 48 hours prior to any pesticide application made under an approved permit.

Further, the applicator must provide written notices of the date and time(s) of application and brand or common name and EPA registration of the pesticide to be used to each household and business that is located within a one-mile radius of the proposed application. A copy of this written notice must be submitted to BECQ prior to the pesticide application.

Every possible effort should be made to control pesticide drift during pesticide applications.

Follow any additional restrictions or requirements included in a permit issued by BECQ.

If you have any questions regarding the above stated information, contact our office at telephone numbers (670) 664-8500/01.

### TO THE APPLICANT:

It is the responsibility of the applicant to completely answer all questions relevant to the project and attach the required supporting materials. If a question is not applicable, "N/A" should be placed in the appropriate space. Until the needed information and materials are supplied, BECQ will not file or act on the application. The application process is approximately 10-business days.

For BECQ Use Only	
Fee Amount:	
Receipt Number:	
BECQ Permit #:	

**Section 1. APPLICANT INFORMATION**

Name of Company: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Location of Company: \_\_\_\_\_

Phone No.: \_\_\_\_\_ Ext.: \_\_\_\_\_ Fax No.: \_\_\_\_\_

Email Address: \_\_\_\_\_

Name of Applicator: \_\_\_\_\_

Contact Information (if different from company phone number above): \_\_\_\_\_

Applicator Certification Number: \_\_\_\_\_ Cert. Expiration Date: \_\_\_\_\_

**Section 2. DESCRIPTION OF APPLICATION AREA (AREA TO BE TREATED)**

Name of Project: \_\_\_\_\_

Purpose of application: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Village: \_\_\_\_\_ Island: \_\_\_\_\_

Phone No.: \_\_\_\_\_ Ext.: \_\_\_\_\_ Fax No.: \_\_\_\_\_

**Section 3. PROPOSED DATE & TIME OF APPLICATION**

Date: \_\_\_\_\_ Time(s): \_\_\_\_\_

The date proposed must be at least twenty business days after you submit this form to DEQ.

Alternate Date/Time(s): \_\_\_\_\_

**Section 4. PESTICIDE APPLICATION INFORMATION**

Brand Name: \_\_\_\_\_

EPA Registration No. \_\_\_\_\_ EPA Establishment No. \_\_\_\_\_

Active Ingredient and Percentage: \_\_\_\_\_

If more than one pesticide is to be used, please complete this section for each pesticide.

Brand Name: \_\_\_\_\_

EPA Registration No. \_\_\_\_\_ EPA Establishment No. \_\_\_\_\_

Active Ingredient and Percentage: \_\_\_\_\_

Brand Name: \_\_\_\_\_

EPA Registration No. \_\_\_\_\_ EPA Establishment No. \_\_\_\_\_

Active Ingredient and Percentage: \_\_\_\_\_

Brand Name: \_\_\_\_\_

EPA Registration No. \_\_\_\_\_ EPA Establishment No. \_\_\_\_\_

Active Ingredient and Percentage: \_\_\_\_\_

Size of application area: \_\_\_\_\_

Targeted Pest(s): \_\_\_\_\_

Type of Equipment(s) to be used for application: \_\_\_\_\_

Type of Personal Protective Equipment (PPE) to be used as required by the label: \_\_\_\_\_

**Section 5. PRE-APPLICATION PRECAUTIONARY MEASURES AND REQUIREMENTS**

List all precautionary measures which will be implemented *prior* to pesticide application:

\_\_\_\_\_  
\_\_\_\_\_

**Section 6. POST APPLICATION PRECAUTIONARY MEASURES AND REQUIREMENTS**

List all precautionary measures which will be implemented **after** pesticide application:

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Re-entry Interval as stated on the Pesticide Label(s): \_\_\_\_\_

Did you inform the contractor (construction company) AND project owner of this time?

- No  
 Yes  
 N/A

Please be advised that all of the information above in Section 4, 5, and 6 must be in conformance with the U.S. Environmental Protection Agency's health warning and instruction for use that is printed on the pesticide package. It is a violation of the CNMI and Federal Regulations to use pesticide in a manner that is inconsistent with its EPA approved labeling.

**Section 7. ADDITIONAL DOCUMENTS REQUIRED**

1. Map of the application site, identifying bodies of water within 100 feet of the site
2. Copy of Applicator Certification
3. Pesticide label and MSDS of each product to be applied.
4. Non-Refundable filing fee of Fifty Dollars (\$50.00) must be submitted to DEQ with this application.

**Section 8. REMINDERS**

You are reminded that pursuant to NMIAC § 65-70-315 (c) (2), Every possible effort should be made to control pesticide drift during pesticide applications; and (d)(1-8): To prevent contamination of surface water, the following restrictions must be observed:

- (1) After the application, cover the treatment site in order to prevent runoff in the event of rain;
- (2) Do not treat soil that is water-saturated;
- (3) Do not treat when raining;
- (4) Do not allow treatment to runoff from the target area;
- (5) Do not apply within 10 feet of storm drains;
- (6) Do not apply within 25 feet of bodies of water or aquatic habitats (such as, but not limited to, lakes, reservoirs, lagoon, permanent streams, marshes or ponds, estuaries, and commercial fish farm ponds);
- (7) Do not conduct applications when sustained wind speeds are above 10 mph (at application site) at nozzle end height; and
- (8) Follow any additional restrictions or requirements included in a permit issued by DEQ.

**Section 9. APPLICANT ACKNOWLEDGEMENT and SIGNATURE**

I, \_\_\_\_\_ as the applicant for this permit, hereby state that I have knowledge of the information provided on this application and that this information is true and correct to the best of my knowledge and belief, and is made in good faith. I have read and understand the provisions and requirements set forth in the CNMI Pesticide Regulations. I understand that it is a criminal offense to submit false information to the government under these regulations.

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

If you have any questions regarding the above stated information, contact our office at (670) 664-8500/01.