

Payment Info: \_\_\_\_\_

License Date: \_\_\_\_\_

License Number: \_\_\_\_\_

*DEPT OF AGRICULTURE USE ONLY*

**WYOMING DEPARTMENT OF AGRICULTURE  
TECHNICAL SERVICES DIVISION**

2219 Carey Avenue  
Cheyenne WY 82002  
(307) 777-7324

*Plant Industry License Application*

**Has there been a change in ownership?** No \_\_\_\_\_ Yes \_\_\_\_\_ Establishment No. \_\_\_\_\_

**Where do you want license and renewal forms sent?** Establishment \_\_\_\_\_ Applicant \_\_\_\_\_

**Establishment Information:** (Physical Location of store, scale, etc.)

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

Address: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone: \_\_\_\_\_

*This information will appear on the printed license.*

**License Applicant Information:** (Owner, corporate office, parent company, etc.)

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

Address: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone: \_\_\_\_\_

*I verify that I have read and understand all applicable Wyoming Standards and Regulations and I agree to abide by the laws and regulations set forth therein. I also understand that each section of the laws and regulations is separately and collectively enforceable, and that by obtaining a license from the Department of Agriculture, I agree to provide access during normal business hours to the department for the purposes of inspection.*

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

\_\_\_\_\_  
Date

\_\_\_\_\_  
CPS - WDA

**LICENSE FEES**

\$25.00 EACH – UP TO \$100 (UNLESS OTHERWISE INDICATED)

*Make checks payable to: **The Wyoming Department of Agriculture***

*(Please Check The Categories in Which You Wish to Be Licensed)*

\_\_\_\_\_ 2127 Grain Warehouseman (\$125) \*\*\*

\_\_\_\_\_ 2131 Nursery Stock Dealer

\_\_\_\_\_ 2331 Nursery Stock Salesman

\_\_\_\_\_ 2113 Pesticide Dealer

\_\_\_\_\_ 2109 Seed Cleaner/Conditioning

\_\_\_\_\_ 2143 Seed Dealer

\*\*\* 2127 Grain warehouse licenses are not required to have a Seed Dealer or Seed Cleaner license.

City: \_\_\_\_\_  
*DEPT OF AGRICULTURE USE ONLY*