VDACS

PESTICIDE APPLICATOR ONLINE SYSTEM

ONLINE.VDACS.VIRGINIA.GOV

OVERVIEW

- Setting Up A LOGIN Account (Username/Password)
- Creating New or Accessing Existing Applicator Record
- Sharing Account Access
- ► Submitting Forms

ONLINE.VDACS.VIRGINIA.GOV LANDING PAGE



VIRGINIA DEPARTMENT OF AGRICULTURE AND CONSUMER SERVICES

VDACS Online Services

The following will take you to the VDACS Online Service.

Pesticide Application

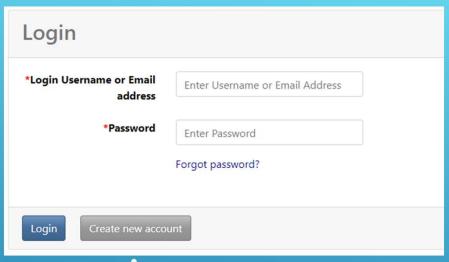
To become a Virginia Certified Pesticide Applicator, register pesticide products, or license pesticide businesses, click the link below.

*** New and improved! ***

VDACS has updated the user interface to make it much simpler and easier to use, with fewer decisions to make at each step, and much less need for reading instructions. We hope you like it!

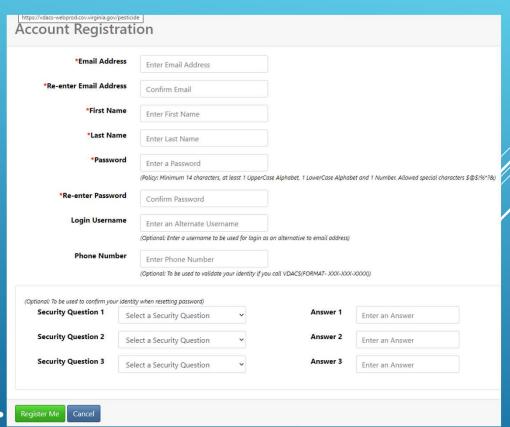
Pesticide Online Application







New To The Online System? Create Login Account





System-Generated Validation Email

From: donotreply <donotreply@vdacs.virginia.gov>

Sent: Monday, December 5, 2022 4:58 PM

To: Odom, Susan (VDACS) <Susan.Odom@vdacs.virginia.gov>

Subject: VDACS login Email Verification

Your online VDACS account has been created. Please verify your login email address by clicking the link below. The link will expire in 4 hours.

https://online.vdacs.virginia.gov/Login/Registration/Confirmation? accountId=790&emailToken=RBIo7o6m7tua%2FvmR3

Click on the link to be returned to the LOGIN page

Access Token

If you have previously registered or certified or licensed with VDACS, you may have existing records. If so, you may have received a letter with a record access token to gain access to your existing records. If you know you have prior records and have not received a record access token, please contact VDACS at opsclrt.vdacs@vdacs.virginia.gov to request a record access token.

Do you have a record access token to enter?

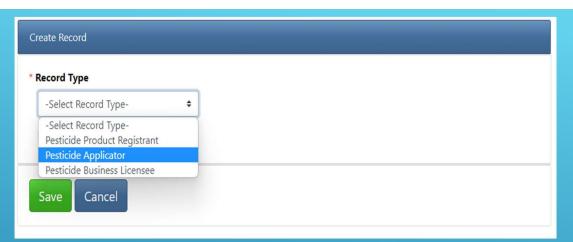




NEW APPLICANTS – SELECT 'NO'

EXISTING APPLICANTS W/O A TOKEN
Request on access email, submit the following to OPSCLRT.VDACS@VDACS.VIRGINIA.GOV:

FULL NAME
DATE OF BIRTH
LAST 5 DIGITS OF SSN
EMAIL ADDRESS YOU WILL USE FOR YOUR ACCOUNT (UNIQUE TO THE APPLICATOR)





EXISTING APPLICANT (**)



Note: If you do not see your record, contact our office at OPSCLRT.VDACS@VDACS.VIRGINIA.GOV

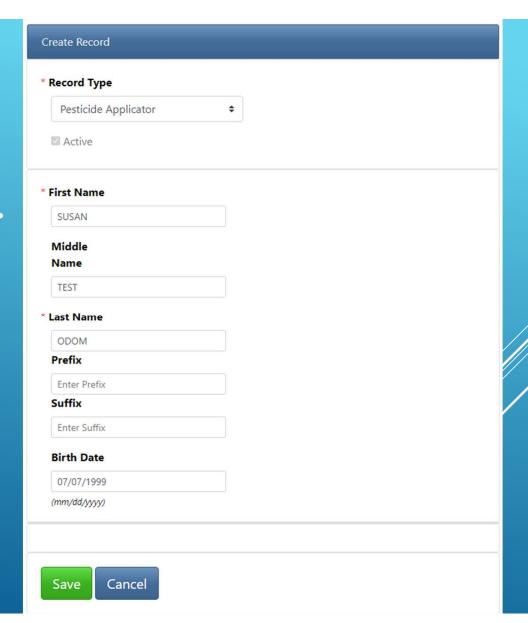
Select an existing record or create a new one

Name	Record Type	
SUES SUCCULENT GARDENS	Pesticide Business Licensee	Use this record
ODOM, SUSAN	Pesticide Applicator	Use this record

Create new record

Important note: If you do not see a person or organization listed but you know they have prior records, please ask the individual or organization to send you an invitation to access their records. Creating a new record when existing records exist may delay the completion of requested actions.

NEW APPLICANT CREATES F PESTICIDE APPLICATOR RECORD

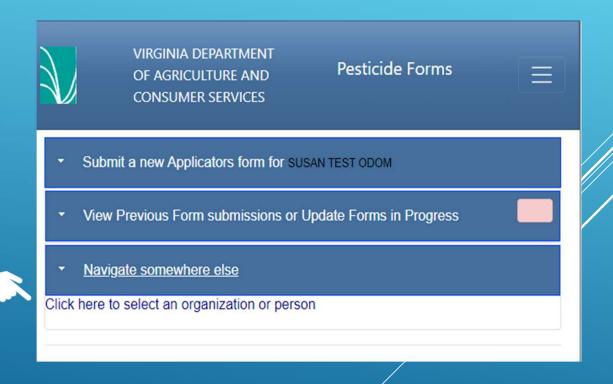


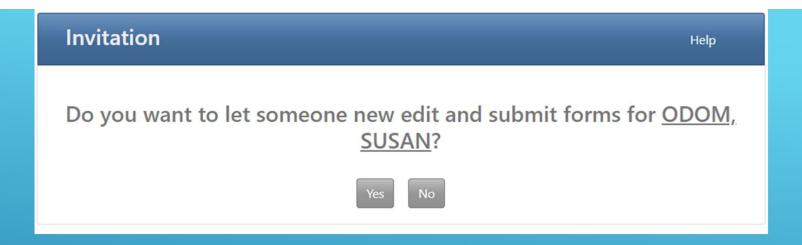
AFTER CREATING APPLICATOR RECORD, USER IS DIRECTED TO THE 'PESTICIDE FORMS' PAGE

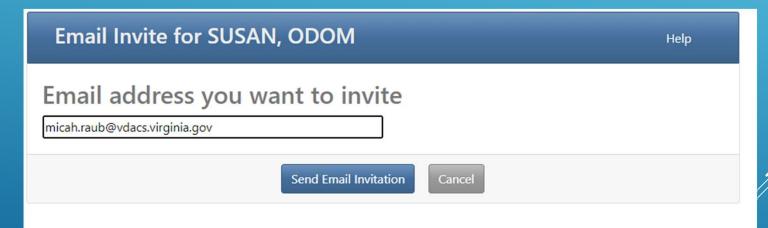
Submit new applications

View previous form status

Share access to your record here







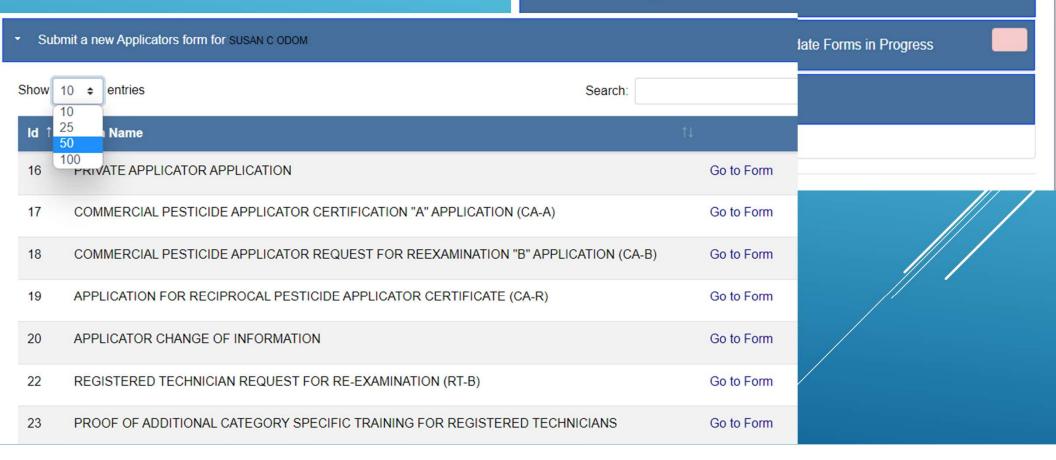
After 'Send Email Invitation' is selected, you will return to previous screen to share with additional contacts



Pesticide Forms



▼ Submit a new Applicators form for SUSAN TEST ODOM



PESTICIDE REGISTERED TECHNICIAN APPLICATION (RT-A) (Do not use this form for

retesting or renewing certification)

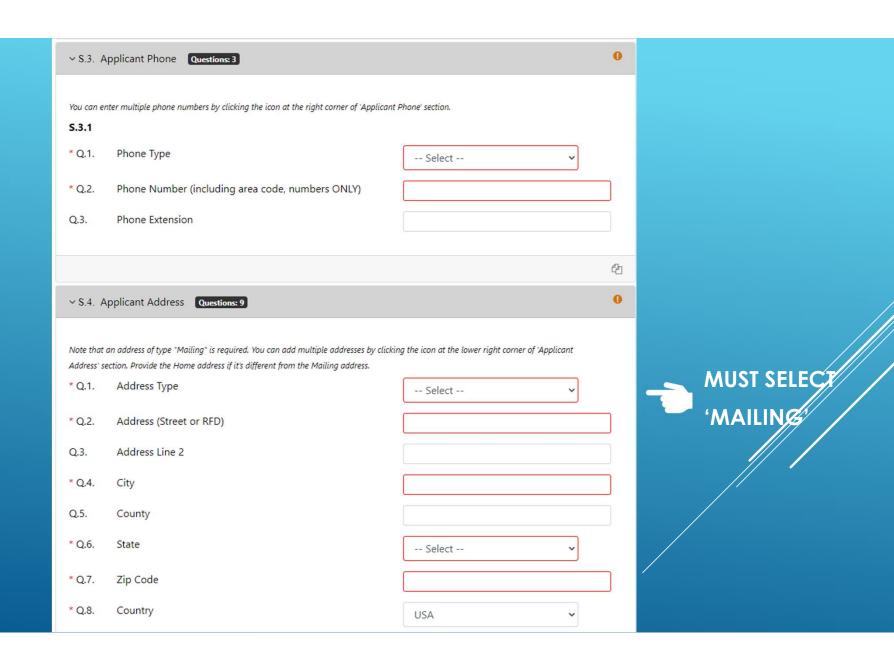
Form Version: 2.0, Official Number: VDACS-07212-A

In accordance with of the Virginia Pesticide Control Act, and regulations adopted thereunder, application is hereby made for CERTIFICATION as a REGISTERED TECHNICIAN.

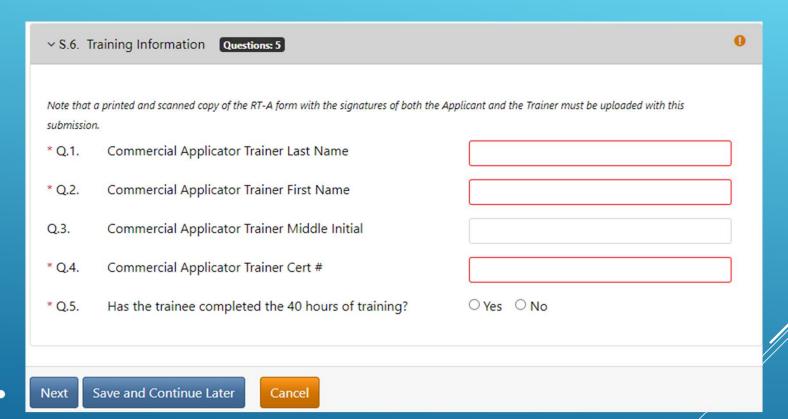
The non-refundable application fee is \$50.00. Federal, State, and Local Government employees are exempt from the fee. All certificates must be renewed by June 30th of the year provided on certificate.

Please note that a scanned copy of the paper RT-A form with both applicant and trainer signatures must be uploaded in order to submit this form online.

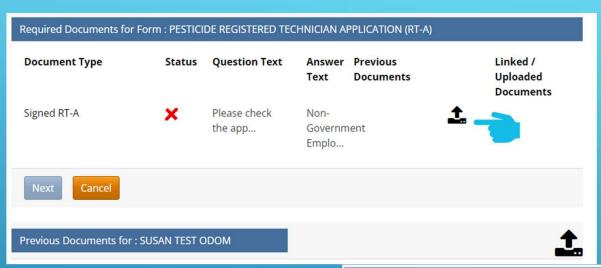
∨ S.1. A	applicant Information Questions: 8		0			
Prior to making application for Registered Technician certification, a prospective applicant must first receive at least 40 hours of training in the safe and proper application of pesticides. The training must include the following: 1. Must include 20 hours Board-approved training consisting of at the minimum, a study and review of all the material contained in the most current edition of the Virginia Core Manual "Applying Pesticides Correctly". (These manuals may be obtained for a nominal fee from the Virginia Tech Pesticide Programs website at http://www.vtpp.org or www.vapesticidemanuals.com.)						
20 hours on-the-job (practical) instruction in the safe and proper handling, mixing, and application of the pesticides normally associated with the technician's job duties under the direct, on-site supervision of a certified commercial applicator.						
* Q.1.	Please check the appropriate employment type:	Select v				
* Q.2.	Applicant Last Name					
	Please enter your legal name, which will be printed on your certifica	te if approved.				
* Q.3.	Applicant First Name					
Q.4.	Applicant Middle Initial/Name					
* Q.5.	Applicant Date of Birth					
* Q.6.	Applicant Social Security Number or ITIN		•			
∨ S.2. A	applicant Email Questions: 1		0			
	nter multiple email addresses by clicking the icon at the right corner of 'Applic	ant Email' section.				
5.2.1						
Q.1.	Email Address					
	Applicants providing an email address will receive communications	and correspondence via email. An email address is also	i.			
	required for applicants considering utilizing the remote testing option	n.				

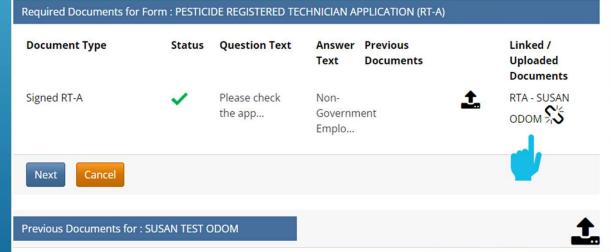


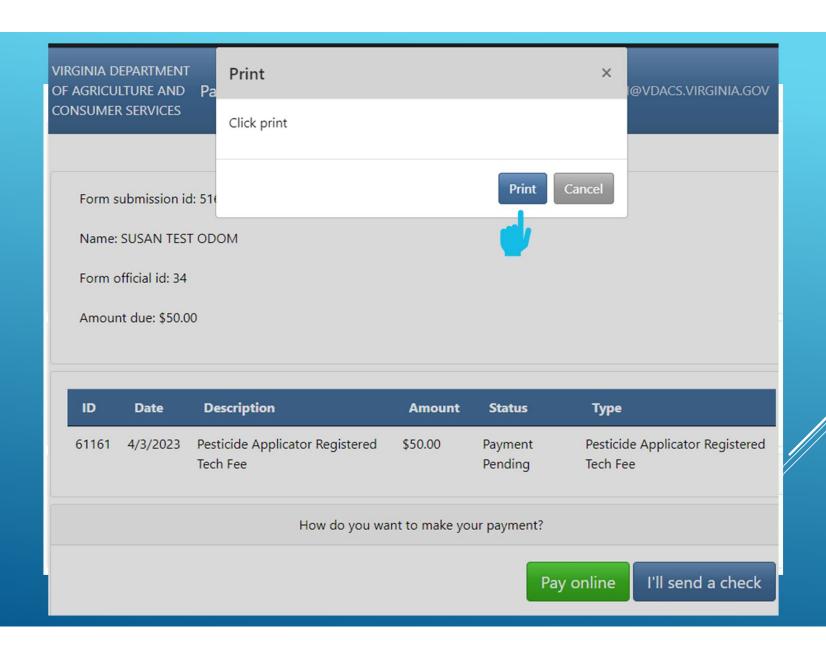
∨ S.5. P	Pesticide Business Information Questions: 11	0
* Q.1.	EMPLOYED BY (Company or agency you work for):	
Q.2.	Company Trading As	
* Q.3.	DATE OF HIRE OR TRANSFER (REQUIRED):	
	Need 40 hours training.	
Q.4.	PESTICIDE BUSINESS LICENSE NO.:	
	Exempt Businesses or Government Entities should use agency assigned number.	
* Q.5.	Business Phone (including area code, numbers ONLY)	
* Q.6.	Business Address (Street or RFD)	
Q.7.	Business Address Line 2	
Q.8.	Business City	
Q.9.	Business County	
* Q.10.	Business State S	elect 🕶
* Q.11.	Business Zip Code	











VDACS Payment Voucher (for mail in)

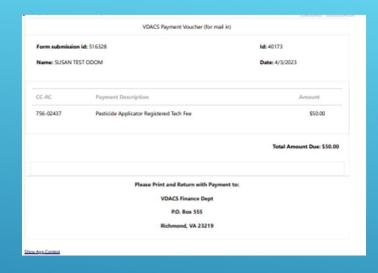
Form submission id: 516328 Id: 40173

Name: SUSAN TEST ODOM Date: 4/3/2023

CC-RC	Payment Description	Amount
756-02437	Pesticide Applicator Registered Tech Fee	\$50.00

Total Amount Due: \$50.00







CLICK HERE TO COMPLETE SUBMISSION (**)

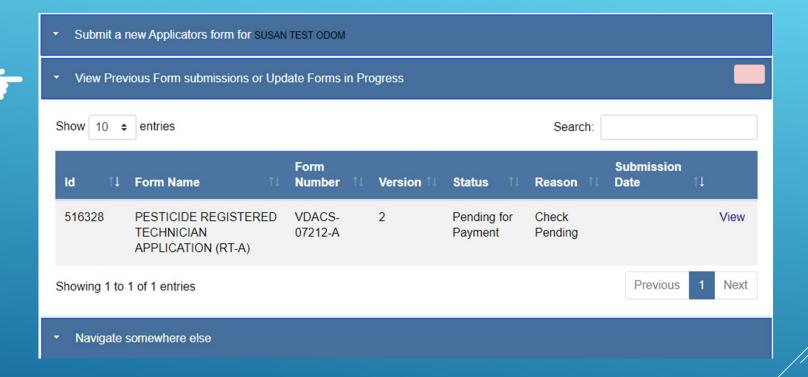


Payment Result

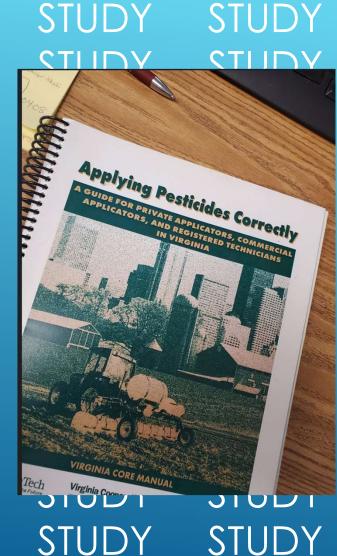
Payment completed Successfully!

Please click here to go to Next Step.

STATUS



STUDY STUDY



STUDY STUDY