

VDACS

PESTICIDE APPLICATOR ONLINE SYSTEM

[ONLINE.VDACS.VIRGINIA.GOV](https://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



Login

***Login Username or Email address**

Enter Username or Email Address

***Password**

Enter Password

[Forgot password?](#)

Login

Create new account



New To The Online System?
Create Login Account

Account Registration

***Email Address**

Enter Email Address

***Re-enter Email Address**

Confirm Email

***First Name**

Enter First Name

***Last Name**

Enter Last Name

***Password**

Enter a Password

(Policy: Minimum 14 characters, at least 1 UpperCase Alphabet, 1 LowerCase Alphabet and 1 Number. Allowed special characters \$@!%*?&)

***Re-enter Password**

Confirm Password

Login Username

Enter an Alternate Username

(Optional: Enter a username to be used for login as an alternative to email address)

Phone Number

Enter Phone Number

(Optional: To be used to validate your identity if you call VDACS(FORMAT-XXX-XXX-XXXX))

(Optional: To be used to confirm your identity when resetting password)

Security Question 1

Select a Security Question

Security Question 2

Select a Security Question

Security Question 3

Select a Security Question

Answer 1

Enter an Answer

Answer 2

Enter an Answer

Answer 3

Enter an Answer

Register Me

Cancel



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=RBlo7o6m7tua%2FvmR3](https://online.vdacs.virginia.gov/Login/Registration/Confirmation?accountId=790&emailToken=RBlo7o6m7tua%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?

Yes

No

NEW APPLICANTS – SELECT 'NO'

EXISTING APPLICANTS W/O A TOKEN

Request an 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)

Create Record

* Record Type

-Select Record Type-

-Select Record Type-

Pesticide Product Registrant

Pesticide Applicator

Pesticide Business Licensee

Save

Cancel

 NEWAPPLICANT

EXISTING APPLICANT 

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

Select an existing record or create a new one

Help

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.



Create Record

* Record Type

Pesticide Applicator

☒ Active

* First Name

SUSAN

Middle
Name

TEST

* Last Name

ODOM

Prefix

Enter Prefix

Suffix

Enter Suffix

Birth Date

07/07/1999

(mm/dd/yyyy)

Save

Cancel

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



VIRGINIA DEPARTMENT
OF AGRICULTURE AND
CONSUMER SERVICES

Pesticide Forms

- ▼ Submit a new Applicators form for SUSAN TEST ODOM
- ▼ View Previous Form submissions or Update Forms in Progress
- ▼ [Navigate somewhere else](#)

Click here to select an organization or person

Invitation

Help

Do you want to let someone new edit and submit forms for ODOM, SUSAN?

Yes

No

Email Invite for SUSAN, ODOM

Help

Email address you want to invite

Send Email Invitation

Cancel

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



Submit a new Applicators form for SUSAN TEST ODOM

Submit a new Applicators form for SUSAN C ODOM

late Forms in Progress



Show 10 entries

Search:

Id ↑	Name	↑↓
16	PRIVATE APPLICATOR APPLICATION	Go to Form
17	COMMERCIAL PESTICIDE APPLICATOR CERTIFICATION "A" APPLICATION (CA-A)	Go to Form
18	COMMERCIAL PESTICIDE APPLICATOR REQUEST FOR REEXAMINATION "B" APPLICATION (CA-B)	Go to Form
19	APPLICATION FOR RECIPROCAL PESTICIDE APPLICATOR CERTIFICATE (CA-R)	Go to Form
20	APPLICATOR CHANGE OF INFORMATION	Go to Form
22	REGISTERED TECHNICIAN REQUEST FOR RE-EXAMINATION (RT-B)	Go to Form
23	PROOF OF ADDITIONAL CATEGORY SPECIFIC TRAINING FOR REGISTERED TECHNICIANS	Go to Form

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

⌵ Collapse All ⌵ Expand All

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. Applicant Information

Questions: 8



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.)

2. 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:

* Q.2. Applicant Last Name

Please enter your legal name, which will be printed on your certificate 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. Applicant Email

Questions: 1



You can enter multiple email addresses by clicking the icon at the right corner of 'Applicant Email' section.

S.2.1

Q.1. Email Address

Applicants providing an email address will receive communications and correspondence via email. An email address is also required for applicants considering utilizing the remote testing option.

▼ S.3. Applicant Phone **Questions: 3**



You can enter multiple phone numbers by clicking the icon at the right corner of 'Applicant Phone' section.

S.3.1

* Q.1.	Phone Type	-- Select --
* Q.2.	Phone Number (including area code, numbers ONLY)	
Q.3.	Phone Extension	



▼ S.4. Applicant Address **Questions: 9**



Note that an address of type "Mailing" is required. You can add multiple addresses by clicking the icon at the lower right corner of 'Applicant Address' section. Provide the Home address if it's different from the Mailing address.

* Q.1.	Address Type	-- Select --
* Q.2.	Address (Street or RFD)	
Q.3.	Address Line 2	
* Q.4.	City	
Q.5.	County	
* Q.6.	State	-- Select --
* Q.7.	Zip Code	
* Q.8.	Country	USA



**MUST SELECT
'MAILING'**

▼ S.5. Pesticide Business Information

Questions: 11



* 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

* Business State

Q.10.

* Business Zip Code

Q.11.

✓ S.6. Training Information

Questions: 5



Note that a printed and scanned copy of the RT-A form with the signatures of both the Applicant and the Trainer must be uploaded with this submission.

* Q.1. Commercial Applicator Trainer Last Name

* Q.2. Commercial Applicator Trainer First Name

Q.3. Commercial Applicator Trainer Middle Initial

* Q.4. Commercial Applicator Trainer Cert #

* Q.5. Has the trainee completed the 40 hours of training?

☐ Yes ☐ No

Next

Save and Continue Later

Cancel



Required Documents for Form : PESTICIDE REGISTERED TECHNICIAN APPLICATION (RT-A)

Document Type	Status	Question Text	Answer Text	Previous Documents	Linked / Uploaded Documents
Signed RT-A	✗	Please check the app...	Non-Government Emplo...		 

Next

Cancel

Previous Documents for : SUSAN TEST ODOM



Required Documents for Form : PESTICIDE REGISTERED TECHNICIAN APPLICATION (RT-A)

Document Type	Status	Question Text	Answer Text	Previous Documents	Linked / Uploaded Documents
Signed RT-A	✓	Please check the app...	Non-Government Emplo...		 RTA - SUSAN ODOM 

Next

Cancel

Previous Documents for : SUSAN TEST ODOM



Print



Click print

Print

Cancel

Form submission id: 516

Name: SUSAN TEST ODOM

Form official id: 34

Amount due: \$50.00

ID	Date	Description	Amount	Status	Type
61161	4/3/2023	Pesticide Applicator Registered Tech Fee	\$50.00	Payment Pending	Pesticide Applicator Registered Tech Fee

How do you want to make your payment?

Pay online

I'll send a check

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



Print

Cancel

VDACS Payment Voucher (for mail in)

Form submission id: 516328 Id: 40173
Name: SUSAN TEST ODOM Date: 4/3/2023

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

Total Amount Due: \$50.00

Please Print and Return with Payment to:
VDACS Finance Dept
P.O. Box 555
Richmond, VA 23219

[View Print Content](#)



PRINT AND MAIL WITH FEE

CLICK HERE TO COMPLETE SUBMISSION



Payment Result

Payment completed Successfully!

Please [click here](#) to go to **Next Step**.

STATUS



Submit a new Applicators form for SUSAN TEST ODOM

View Previous Form submissions or Update Forms in Progress

Show 10 entries

Search:

Id	Form Name	Form Number	Version	Status	Reason	Submission Date
516328	PESTICIDE REGISTERED TECHNICIAN APPLICATION (RT-A)	VDACS-07212-A	2	Pending for Payment	Check Pending	View

Showing 1 to 1 of 1 entries

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1

Next

Navigate somewhere else

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