



FOR CITY USE:

LL# _____

EXPIRATION _____

City of Marco Island
Professional Lawn, Landscape Maintenance, & Fertilizer Applicator
Registration Form

Business Name: _____

Business Person Submitting Application: _____

Business Address: _____

Business Phone#: _____ Business fax: _____

Business Email: _____

Total Number of Supervisors _____ Number of Employees: _____

Number of state-licensed vehicles owned _____ Or rented: _____

Total number of accounts or service properties on Marco Island: _____

Initial Registration (\$50.00)

Renewal (\$15.00)

Does your business hold any of the following certifications or licenses?

(Attach a copy with application submission)

- Certified Pest Control Operator Certificate
- Limited Certification Commercial Landscape Maintenance
- Ornamental Turf Certificate
- Green Industries Best Management Practices Certification (GI-BMP Certificate)
- Fertilizer License from FDACS

Items to be submitted to the City of Marco Island with the application:

- Green Industries Best Management Practices Certification (GI-BMP)
- Business Tax Receipt from the County
- Fertilizer License from FDACS *(for fertilizer applicators only)*
- Occupational Zoning Certificate from City of Marco Island *(business offices located on Marco Island)*
- City of Marco Island Registration Application *(this form)*
- Registration or Renewal Fee
 - Non-refundable fee **(one decal is provided with registration)**
 - Each additional decal is \$5.00. **Total number of decals requested** _____
 - Online Invoice Requested **or** Check Payable to **CITY OF MARCO ISLAND**

I hereby affirm that the information supplied on this application is true and correct to the best of my knowledge.

Applicant's Signature

Date

**THIS CERTIFICATION DOES NOT LICENSE THE APPLICATION OF PESTICIDES OR HERBICIDES,
NOR DOES IT PROVIDE ARBORIST CERTIFICATION.**

Email completed application and documents to: gmhelp@cityofmarcoisland.com