

Return this completed form with a copy of your FDACS Commercial Fertilizer Applicator License to:  
Manatee County NRD-Env. Protection Division  
202 6<sup>th</sup> Ave East, Bradenton, FL 34208; fax to (941) 742-5996; or email MCfertilizer@mymanatee.org

# Manatee County Affidavit Vehicle Decal for Fertilizer Applicators

I, \_\_\_\_\_, am operating with the  
First Name (print) Last Name (print)

business known as: \_\_\_\_\_  
Business Name

performing landscape services including Fertilizer Application within Manatee County, Florida.

I acknowledge that I have read and understand the provisions of the Part II, Chapter 2-35 of the Manatee County Code of Ordinances (a.k.a. Ordinance No. 11-21) pertaining to the regulations governing landscape maintenance practices and the use of fertilizers containing nitrogen and/or phosphorous within Manatee County.

I further acknowledge that all my activity pertaining to Landscape Maintenance & Fertilizer Application shall be conducted in accordance with these provisions and with the Green Industry Best Management Practices for the Protection of Water Resources for which I have been trained or certified.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

### Contact Information

Employer Mailing Address:

\_\_\_\_\_  
Number/ Street/City/St/Zip code

Employer Phone Number: (\_\_\_\_\_) \_\_\_\_\_

Required Information in case a replacement decal is requested:

Home Mailing Address:

\_\_\_\_\_  
Number/ Street/City/St/Zip code

Home Phone Number: (\_\_\_\_\_) \_\_\_\_\_

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### **For Internal Use Only**

I acknowledge receipt of the documents for the above named individual and issue the vehicle decal number \_\_\_\_\_ effective on the date below:

Limited Commercial Fertilizer Applicator License       Signed affidavit

County Witness Signature: \_\_\_\_\_ Date: \_\_\_\_\_