

SCREEN						A	CTION
		Lo	og In			1.	Navigate to http://www.connect pestboard.ca.gov
	User Name (Email) * Password *					2.	Select "Log In"
	-J ♠ 合 Forgot Passw	Click h ord? Q Forgot the	Log In ere to Register e User Name?			3.	If you have not previously registered, select <b>"Click here to Register</b> " and complete the registration process
← → C a connect-testpest           BFCB           License Type           No records found.	board.ca.gov/entity/dashboard	ructural Pest Contro re Date Expiration Date	DI Board License Link License Status Actions	Test lin Name	<ul> <li>ه ک ا ا و و و و و و و و و و و و و و و و و</li></ul>	4.	Once logged in the User Dashboard will be displayed
Applications Application Type Lice No applications found.	ense Type Application#	Submitted Date Busines	New Application	Notifications Subject Do No records found.	Q Search Keyword		
Applications					New Application	5.	In the Applications pane, select <b>"New Application"</b>
Application Type	License Type	Application#	Submitted Date	Business Name	Status Action		
No applications foun	d.						
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Application Type S	Selection		6.	The <b>"Application</b> <b>Type Selection"</b> screen will be
Please select the a	pplication	type from the drop down list below.		displayed
Application		- Select -		
		Create Application Cancel		
ation Type Selection tration and Login Help calion	9	Business Registration Y	7.	Select Branch Off Registration or Registration of Company
ие Туре		- Select - V		
		Branch Office Registration		
		Registration of Company		
Instructions and Disclosures	8	Physication for Registration of company	8.	The first tab displays
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Company Information	⊗	INSTRUCTIONS FOR COMPLETING THE APPLICATION		application
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Company Information General Information Questions Disciplinary and Conviction Military Questions Document Upload Attestation	© © © © ©	INSTRUCTIONS FOR COMPLETING THE APPLICATION THE REQUEST FOR APPROVAL OF REGISTERED COMPANY MUST BE APPROVED PRIOR TO COMPLETION OF APPLICATION FOR COMPANY REGISTRATION. Once a name style has been approved by the Board, you will need to complete the online Application for Company Registration, pay the required registration fee, and upload the required insurance. bond, and workers' compensation documents. SOLE-OWNER OR PARTNERSHIP ONLY If name style is fictitious, you must file with the county recorder's office and submit a copy of the fictitious name statement to this office along with the above documents. CORPORATION The Articles of Incorporation must be submitted after endorsement by the Secretary of State (copy is acceptable). If fling for DBA, submit a copy of the fictitious name statement from county recorder's office. The Board does not recognize Limited Liability Companies (LCS).		application instructions and disclosures relate to the registratic process
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Company Information General Information General Information Disciplinary and Conviction Military Questions Document Upload Attestation Fee and Payment For questions abox a704, or by email at For questions abox by email at Cacied Save & Continue	ion ion issue	INTRUCTIONS FOR COMPLETING THE APPLICATION  INTERCISTING CONCALCE REGISTERED COMPANY MUST BE APPROVED PRIOR TO COMPLETION OF APPLICATION FOR COMPANY REGISTRATION.  Intercisting of the provide of the board, you will need to complete the online Application for Company Registration, pay the required registration fee, and upload the required insurance.  Intercisting of the provide of the board, you will need to complete the online Application for Company Registration, pay the required registration fee, and upload the required insurance.  Intercisting of the provide of the board, you will need to complete the online Application for Company Registration, pay the required registration fee, and upload the required insurance.  Intercisting of the Board does not mecogine the the county recorder's office and submit a copy of the fictitious name statement to this office along with the above documents.  Intercisting of the Board does not recognize limited liability Companies (LLC).  Section Board of the Board does not recognize companies (LLC).  Intercisting of the Board does not recognize limited liability Companies (LLC).  Section Board of the Board does not recognize limited liability Companies (LLC).  Intercisting of the Board does not recognize limited liability Companies (LLC).  Section Board of the Department of Consumer Affairs collects the personal information requested on this form as authorized by Business and Professions Code Section BO1 (Biggistration of Company and Biggistration (Cliffice Registration), Cliffice Registration, Cliffice R	9.	application instructions and disclosures relat to the registratic process Select <b>"Save &amp;</b> <b>Continue"</b>



REEN			ACTION
		Application for Registration of Company	
Instructions and	0		10. Complete all
Disclosures	-	Company Information	sections of the
Company Information	8	Branch Selection	Company
ieneral Information Questions	$\otimes$	There is no fee for upgrading to include additional Branches of service to an existing license.	Registration tab, all
isciplinary and conviction	8	Check branch(es) in which you are applying for registration: *	fields marked with
Ailitary Questions	8	Branch 1 - Furnigation	a red asterisk (*)
ocument Upload	8	Branch 2 – General Pest	are required fields:
ittestation	8		
ee and Payment	0	Firm Name must match the name approved by SPCB.     Each question must be fully and fruthfully answered. Include required responses and/or document uploads to this application wherever so directed.     Each question must be answered as applying to all members of partnership or qualifying officers of a corporation and shareholders with 10% ownership or more in a corporation.     Any material misrepresentation is grounds for refusal or subsequent revocation of a license.	<ul> <li>Branch Selection</li> <li>Firm Detail</li> <li>Address of the</li> </ul>
			of Business Mailing Address Principle Office is located Live Scan Shareholder's Information
Add New Name ave & Continue Sav	e & Exit	Title     Shareholder Percentage     Actions	11. Once you've completed all necessary informational fields, click the <b>"Save &amp;</b> <b>Continue"</b> button



12.	Complete the Generation Information Question tab For question 1 select the "Add New" and complete the informational fie and select "Sav
12.	Complete the Generation Information Question tab For question 1 select the "Add New" and complete the informational fie and select "Sav
<pre>statistics of individuals and bulanesses with whom you, or any of you, have been associated with in the peet control bulaness as partners or bulaness associates in the last free years:</pre>	Generation Information Question tab For question 1 select the "Add New" and complete the informational fie and select "Sav
13.	Information Question tab For question 1 select the "Add New" and complete the informational fie and select "Sav
Interview       Since Line 2       13.         Information Questions       Full Name*       Since Line 2       10.       10.         Information Questions       Since Line 2       10.       1	Question tab For question 1 select the "Add New" and complete the informational fie and select "Sav
<pre>start and address of individuals and businesses with whom you, or any of you. have been associated with in the pet control business as partners or business associates in the last five yeas:</pre>	For question 1 select the " <b>Add</b> <b>New</b> " and complete the informational fie and select " <b>Sav</b>
Import Nucleares Name: Source Line 2       City       State       County       Note (Note Name)       Actions         Import Nucleares Name: State       Import Name:	For question 1 select the " <b>Add</b> <b>New</b> " and complete the informational fie and select " <b>Sav</b>
Ar yea, we any yrys, at the present time employed to engaged in the structural pert control business?"   Image:	For question 1 select the "Add New" and complete the informational fie and select "Sav
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harm ead address of individuals and businesses with whom you, or any of you, have been associated with in the peet control business as pathenes or business associates in the last five years:   Internation Questions:   Information Questions:   Text Line 1   Street Line 2 City Code / Postal Code* City Cod	New" and complete the informational fie and select "Sav
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<pre>/tem //tem //</pre>	informational fie and select <b>"Sav</b>
tect individual or Business * Full Name *  a	and select <b>"Sav</b>
Information Questions   Information Questions   me and address of individuals and businesses with whom you, or any of you, have been associated with in the pest control business as partners or business associates in the last five years:   Now     Information Questions   Total Country Zip Code Actions   any of you, at the present time employed or engaged in the structural pest control business?*   No	ana select "Sav
Information Questions         me and address of individuals and businesses with whom you, or any of you, have been associated with in the pest control business as partners or business associates in the last five years:         Now         Information Questions         me and address of individuals and businesses with whom you, or any of you, have been associated with in the pest control business as partners or business associates in the last five years:         Now         Information Questions         Now         15.	
State City* Zip Code / Postal Code*     Cancel     Cancel     Information Questions   me and address of individuals and businesses with whom you, or any of you, have been associated with in the pest control business as partners or business associates in the last five years:   New     Information Questions     me and address of individuals and businesses with whom you, or any of you, have been associated with in the pest control business as partners or business associates in the last five years:     New     any of you, at the present time employed or engaged in the structural pest control business?*     No     15.	
Cancel  Information Questions  me and address of individuals and businesses with whom you, or any of you, have been associated with in the pest control business as partners or business associates in the last five years:  New  Ful/Business Name Street Line 1 Street Line 2 City State Country Zip Code Actions  any of you, at the present time employed or engaged in the structural pest control business?* No	
Cancel     Information Questions     me and address of individuals and businesses with whom you, or any of you, have been associated with in the pest control business as partners or business associates in the last five years:     New     ful/Business Name   Street Line 1     Street Line 1   Street Line 2     City   State   Country   Zip Code     Actions     any of you, at the present time employed or engaged in the structural pest control business?*     No	
Full/Business Name       Street Line 1       Street Line 2       City       State       Country       Zip Code       Actions       Image: Compared to the structural performance of the structural performa	"yes" is selected provide additio information on t pest control
r any of you, at the present time employed or engaged in the structural pest control business?* No	DOSILIESS
	If "No" is selected
tem	this information
What Capacity *	not required.
v	Select <b>"Save &amp;</b>
Cancel	Continue"
New	
Capacity    Other    Actions	
Intue Save & Ext	



				ACTION
B	Structural Pest	Control Board	Test nline Application Guides Connect Support	16. Continue to the
Instructions and Disclosures	Disciplinary and Conviction			Conviction tab
Company Information	<ul> <li>1. Have you, or any of you, ever had a profes</li> <li>YES, upload a signed detailed statement.*</li> </ul>	sional or vocational license refused, denied, susp	nded or revoked by this or any other State agency? If	
General Information Questions	Yes No     No     . Have you, or any of you, ever been associ	ated with any person, partnership or corporation,	whose professional or vocational license was refused,	
Disciplinary and Conviction	enied, suspended or revoked by this or any Yes No	other State agency? If YES, upload a signed deta	ed statement. *	
Military Questions	3. Do you, or any of you, have any pending a vocational license? If YES, upload a signed d     Ves No	disciplinary action(s) against you, or any of you, b etailed statement. *	any State agency in regards to any professional or	
Document Upload	A. Will any individual, not listed above as an suspended, or application refused by this or	officer or partner, be associated in any capacity v any other State? If YES, upload a signed detailed	ith you, who has had a pest control license revoked or tatement. *	
Have you, or a ES, upload a si Yes N Herein States Herein States To add new fil Type Agency Lette Agency Lette U Detailed States	r of you, ever had a professional or vocations ed detailed statement.* r files for upload, please click "Browse", or click-and v er tement	al license refused, denied, suspended or I-drag files into this area File Name Suspended.docx	revoked by this or any other State agency? If Actions	17. Answering "Yes" to any question will open an upload document option for the applicant to provide a Detailed Statement or Agency Letter
Other 5. Have you, or Ves ON	y of you, ever been found guilty of any violation	or any provision of the Structural Pest Cor	trol Act? If YES, upload a signed detailed statement. *	18. Select <b>"Save &amp;</b> <b>Continue</b> " to move on to the next section.



CREEN		ACTION
		19. Complete the
a	Application for Registration of Company	tab
Military Questions		
1. Are you, or any of you, curren	tly in the United States Military? *	
2. Have you, or any of you, ever	r served In the United States Military? *	
3. Are you, or any of you, or so duty station in California under Yes No	meone that you, or any of you, are either married, in a legal union or domestic partnership with, an active duty member of the Armed Forces of the United States who is assigned to a official active duty military orders? If yes, multiple documents can be uploaded. *	
Save & Continue Save & Ex	α	20. Answering " <b>Yes</b> " to
		any questions will prompt the
_		upload supporting
28	Structural Pest Control Board	documentation.
Company 🔗	1. Are you, or any of you, currently in the United States Military? * Yes No	
General		IIP: Use the trash
Questions	+ Browse New Files	Actions header to
Disciplinary and 📿 Conviction	to add new files for upload, please click "Browse", or click-and-drag files into this area	delete the
Military	Type File Name Actions	supporting
Questions	Military Orders	document if
Upload	Military Orders	needed
Attestation	Other	
	Type File Name Actions	
		21 Select <b>"Save 8</b>
		Continue" to move
		to the next section
Cours De		
Save or		



EEN				ACTION
			Technline Application Guides Co	22. Read the
Instructions and	Structural Pest Control	Board	TESCHINE Application outlies - Co	instructions section
Disclosures	Document Upload			
Information	Instructions			
General 🥏	Document Upload Instructions:	nut effect the full company same approved by CDCD		
Questions	All financial responsibility documents submitted in     All financial responsibility documents submitted in     All Qualified Managers must sign the Company Re	nust reflect the full company name approved by SPCB. nust reflect an address used on the Application for Compa egistration Bond.	any Registration.	
Conviction	All required forms are available for download at p	estboard.ca.gov		
Military Questions	Documents			
Document 🛛 🔊	1. Please upload the Company Registration Bond Do	ocument. Click here to download the Company Registr	ration Bond Document.	
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CREEN					ACTION
	Save & C	ontinue	Save & Exit		26. Select <b>"Save &amp;</b> Continue"
Instructions and Disclosures Company Information General Information Q	Attestation The information on this application is required pr voluntary. Failure to provide any of the required	Application for Regist	ration of Company ompany) and following of the Business and Profession being rejected as incomplete. The information you fu	s Code. All information requested in this application is mandato nish will be used to determine whether you do or do not meet t	27. Complete the Attestation tab by checking the
Questions S Disciplinary and Conviction S Military Questions S Document Upload S Attestation S Fee and Payment S	Section 8230 of the Government Code, You have seq of the CuVic Code) The information is maintain Custodian of Records. A sole owner must sign this application personall A partnership application must be signed by aid Cuc Cuc Cuc Cuc Cuc Cuc Cuc Cuc Cuc Cuc	an ight of access to records maintained b ed by the Structural Pest Control Board, 2 , , , partner,	this agency which contain personal information about 5005 Evergreen Street, Suite 1500, Sacramento, CA 951 to 10% or more ownership in a corporation. hand accuracy of all statements and representation	It you subject to the provisions of the Information Practices Act. 115-3831; telephone 916/561-8704. The Registrar of the Board is smade in this application, including all statements attached he of the "Notice of Collection of Decional Information" *	and completing the Name, Title, and Signature boxes
	Full Name *	Title *	Signature *	Date *	28. Select <b>"Save &amp;</b> Continue"
Fee Description Company Augustat Service Fee 2.3% Total	on		Fee Amount 5 120.00 5 2.75 5 122.76		29. Complete the Fe and Payment section. Select th
Credit Card Payment Information VIST Card Number:*	DECTOR	First Name* Last Name*	Billing Information         Required Fields           Copy Details From Application		"Copy Details from application" box autofill the billing information
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