



APPLICATION FOR COMMERCIAL  
LAWN SPRAYING/TREATMENT

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

- Attach list of names of employees applying herbicides and pesticides on lawns.
- Attach a copy of your Minnesota Department of Agriculture herbicide and pesticide applicator license.
- Submit with Application one of the following:
  - A performance bond in the amount of \$1,000  
or
  - A copy of liability insurance that is in effect for the license period issued by an insurer licensed to do business in the State of Minnesota providing at least \$300,000 of coverage because of bodily injury to any one person in any one occurrence, \$600,000 because of bodily injury to two or more persons in any one occurrence, \$100,000 because of injury to or destruction of property of others in any one occurrence needs to be submitted with this application form.

Permit Fee: \$30.00

Remit to: City of New Prague  
118 Central Ave. N.  
New Prague, MN 56071  
Phone 952-758-4401  
Fax 952-758-1149