



*Tennessee Department of Agriculture, Consumer & Industry  
Services Division, Pesticide Section, P.O. Box 40627, Nashville, TN 37204  
Phone (615) 837-5148 Fax (615) 837-5012*

## **APPLICATION FOR REMOVAL OF EMPLOYEE FROM A CHARTERED COMPANY**

Make sure you list employee name as listed on the charter **when** you request removal.

Fill out the following information and send your application to the address listed above or fax.

If you have any questions, please call the number listed above.

Company Name & Charter# \_\_\_\_\_

Employee Name \_\_\_\_\_

Address \_\_\_\_\_

City, State, & Zip Code \_\_\_\_\_

Social Security# (Last 4 digits) \_\_\_\_\_

TDA ID Number \_\_\_\_\_

Phone Number (    ) \_\_\_\_\_

Email Address \_\_\_\_\_