

# Pesticide Application Permit Renewal Request

Date: [Insert Date]

To: [Insert Recipient Name]

[Insert Recipient Title]

[Insert Organization/Agency Name]

[Insert Address]

[Insert City, State, Zip Code]

Dear [Recipient Name],

I am writing to formally request the renewal of the pesticide application permit for ongoing treatment at [Insert Site Location]. The current permit is set to expire on [Insert Expiration Date], and we wish to continue our licensed operations in compliance with all applicable regulations.

Details of the ongoing treatment are as follows:

- **Pesticide Name:** [Insert Pesticide Name]
- **Application Method:** [Insert Application Method]
- **Target Pest:** [Insert Target Pest]
- **Treatment Frequency:** [Insert Frequency]

We have been diligent in adhering to all safety protocols and guidelines and have maintained a record of effective treatment with minimal impact on the surrounding environment. We request your prompt attention to this matter to ensure continuity of our operations.

Attached are all necessary documents for your review, including the previous permit, application forms, and evidence of compliance with safety regulations.

Thank you for considering our request. We look forward to your timely response.

Sincerely,

[Your Name]

[Your Title]

[Your Organization]

[Your Phone Number]

[Your Email Address]