

ALLEGANY TERRITORY 90 OHI:YO' WAY SALAMANCA, NY 14779 (716) 945-1790 CATTARAUGUS TERRITORY 12837 ROUTE 438 IRVING, NY 14081 (716) 532-4900

# ENVIRONMENTAL PROTECTION DEPARTMENT

# PESTICIDE USE PERMIT APPLICATION

In accordance with **Pesticide Ordinance § 2-2 (f)**, applications for a Pesticide Use Permit must be filed **30 days** prior to the pesticide application for which the permit is required to the Seneca Nation Business Permits Office, who will then submit the application for review by the Seneca Nation Environmental Protection Department's (EPD) Pesticides Program Manager. Permits will be handed back to applicant for revision within 15 days and post-recommendation submission is required 15 days prior to projected pesticide application.

In accordance with **Pesticide Ordinance § 3-5 (b)**, applicant must provide **15 days advance Notice of Intent** to use pesticides per application event. Thus a detailed pesticide application schedule must be provided to SNI EPD's Pesticides Program Manager prior to intended start date. Failure to do so will result in the revocation of SNI issued permits.

Please complete this form <u>in its entirety</u> in accordance with **Pesticide Ordinance § 2-1**, § **2-2**, and § **2-3** in order to ensure the proper handling of your application. Print or type unless otherwise noted.

**Note:** Instructions for completing this application can be found on page 5.

SECTION 1: GENERAL INFORMATION				
[ ] New Applicant	[ ] Renewal			
Date:				
Business / Entity Name:				
Owner / Responsible Party:				
Address:				
Phone Number:				
Contact Person (If Different Than Above):				
Contact's Phone Number:				
Contact's E-Mail:				

# **SECTION 2: FEES**

A fee of **\$150.00** is to be submitted with each permit that you are applying for. There is no discount for municipalities. The application will not be processed without the fee. The fee shall be non-refundable and shall be paid by check or money order to the Seneca Nation of Indians.

SECTION 3: PERMIT CATEGORIES APPLYING FOR  (Check All That Apply)							
Non-Agricultural:	Agricultural:						
<ul> <li>[ ] Industrial / Institutional</li> <li>[ ] Wood Destroying Organism Management</li> <li>[ ] Ornamental and Turf</li> <li>[ ] Right-of-Way</li> <li>[ ] Aquatic</li> <li>[ ] Fumigation</li> <li>[ ] Wood Preservation</li> </ul> SECTION	<ul> <li>[ ] Grower</li> <li>[ ] Seed Treatment</li> <li>[ ] Custom Applicator</li> <li>Fee Exempt:</li> <li>[ ] SNI Department / Enterprise</li> <li>[ ] SNI Community Member f</li> <li>4: SITE INFORMATION</li> </ul>		vate Dwelling				
Projected Date(s) of Pesticide Applicatio	n:						
·	Acr	res:					
Land Owner:							
	State Protection Status?  State Protection Status?  site located within an aquifer area?  a public water supply watershed?	[ ] Yes [ ] Yes	[ ] No				
•							
Pesticide(s) Being Applied to this Parcel:  (including estimated quantity per acre)  Application Method(s):							

Information form found on the SNI website. Each site/parcel should have a separate entry.

# **SECTION 5: PESTICIDE APPLICATOR INFORMATION** a. Sub-Contractor(s)/Hired Applicator (If Applicable): Business / Establishment Name: Sub-Contractor / Applicator: Mailing Address: Records Address: Phone: E-Mail: **b.** Current Certifications / Licenses / Permits (Applicators): Applicator, Technician, or NYS Certification **Apprentice Name Certification # Expiration Date Categories** c. Pesticide Handlers & Workers (Agriculture Only): **EPA Worker EPA Handler Verification # Verification # Expiration** Handler / Worker Name Trainer's Name **Note:** Please attach a separate page if more space is needed for the above sections.

	SECTION 6: CERTI	FICATION OF LIABILITY INSURANCE	<u>J</u>		
	Insurance Firm:				
	Comparable Bond:				
	Expiration:				
	General Liability:	(\$300,000	minimum)		
	Property Damage:	(\$300,000	minimum)		
Inci	dent Bodily Injury:	(\$1,000,00	00 minimum)		
	SECTION '	7: SUPPORTING DOCUMENTS			
[ ] Attachment A An 8-1/2" x 11" copy or original of a USGS Topographic Quadrangle Map (scale 1:24,000) indicating the exact location of each area to be treated.					
[ ] Attachment B	[ ] Attachment B Insurance identification(s) minimum: \$300,000 individual, \$1,000,000 per incident bodily injury, \$300,000 property damage insurance, <b>-OR-</b> Surety bond of comparable valuable.				
[ ] Attachment C	Copies of Certification (for each person or employee applying).				
[ ] Attachment D	Copy of each lease agreement between SNI Community Member and applicant.				
[ ] Attachment E	Safety Data Sheet (SDS) for every chemical used on Seneca Nation Territory.				
[ ] Attachment F	nt F Copy of Business License.				
	SECTION 8: AC	CKNOWLEDGEMENT & CONSENT			
I (we) declare that the information contained in this application and any attachments is true and correct to the best of my (our) knowledge and belief. I (we) understand that any material misrepresentation will result in the denial or subsequent revocation of any permit. I (we) agree, based on the consensual and contractual relationship with the Seneca Nation, to abide by all applicable laws, regulations, and rules of the Seneca Nation of Indians.					
regulations, or rules gover (our) signature(s) evidence	rning this permit or the conces my (our) sworn promise,	The Seneca Nation of Indians for the purpose of eluct of any business within the Seneca Nation of I as required under <b>Pesticide Ordinance § 2-2(G)</b> e Nation while performing their business on Nation	Indians' territories, and my that I (we) "must adhere to		
Printed	Name	Signature	Date		
Printed	Name	Signature	Date		
Note: If more signature Consent form found on		plication, please fill out the Supplemental Act	knowledgment and		

# **INSTRUCTIONS**

# **SECTION 1: GENERAL INFORMATION**

**2010 Pesticides Ordinance § 2-2 (f)** "Applications for a Pesticide Use Permit must be filed each year with the Clerk of the Seneca Nation of Indians. Such filing must be made **30 days** prior to the pesticide application for which the permit is required."

- · Check the appropriate 'New Applicant' or 'Renewal' box. Applications must be renewed annually, if you have not been approved for a permit in the last year, check 'New Applicant'.
- · Complete each field provided <u>in its entirety</u> and enter the name and contact information for a person with managerial authority for whom you would like our office to deal with regarding administrative and operational matters pertaining to your permit.

# **SECTION 2: FEES**

- § 2-2 (b) "The fee for each annual Pesticide Use Permit shall be \$150.00. The Seneca Nation or Commercial Applicators applying pesticides for the benefit of, and under contract with the Seneca Nation of Indians, shall be exempt from payment of this fee."
- · Payment is accepted only by check or money order and shall be made out to SENECA NATION.

# **SECTION 3: PERMIT CATEGORIES APPLYING FOR**

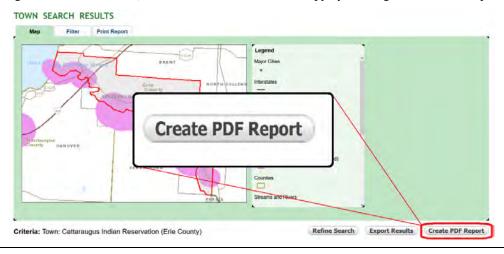
- · Check the appropriate category box(s) being applied for.
- · If you qualify under the fee exempted categories, check the appropriate box <u>in addition to</u> the requested Non-Agricultural or Agricultural categories. To qualify as a SNI Community Member for property/private dwelling, submit a photocopy of the **owner's** valid Seneca Nation of Indians Tribal Identification Card.

#### **SECTION 4: SITE INFORMATION**

- § 3-5 (b) "It shall be the responsibility of each person to notify the SNI Environmental Protection Department 15 days in advance of the intent to use pesticides..."
- Enter your estimated date(s) of pesticide application as accurately as possible. You will still be responsible to provide a Notice of Intent to apply pesticides to SNI EPD at least **15 days** before each application. This should be done by mail or sent to: epd@sni.org
- · Complete each field provided in its entirety. Contact the Pesticides Program Manager with any questions on this section at:

(716) 945-1790 ext. 8994 or at: epd@sni.org

- § 2-1 (e) "Absolutely no application of any pesticide, including non-restricted pesticides, will be permitted or allowed within the Source Water Protection Area".
- · Using the website: http://www.dec.ny.gov/natureexplorer/app/
- · Select "Search by Location", then the "Town" tab near the top banner. Select your town(s) from the list (Allegany Indian Reservation, Cattaraugus Indian Reservation) and click "Submit". Create a copy by clicking "Create PDF Report".



· Based on the map generated, check to see if the application location(s) lies within one of the protected areas. Check the appropriate "Yes" or "No" boxes for Federal/State Protection Status.



- · Using the website: <a href="https://www.snigis.org">https://www.snigis.org</a>
- · Select "Public Apps" from the menu bar, then select "Seneca Nation Aquifers" and locate your parcel(s) using the map. Based on the aquifer locations, check the appropriate "Yes" or "No" box. Map legend can be found in the upper left corner.
- · Using the map from the previous step, report if there are any streams, rivers, or lakes on or near the application location that flow into the public water supply watershed by checking "Yes" or "No".
- § 3-2 (a) "Pesticides shall be used in a manner and under such wind and other conditions as to prevent contamination of crops, property, structures, lands, pasturage, or waters, and wetlands as to not allow pesticides to move off target application areas as approved by EPD."
- § 3-2 (d) "All equipment containing pesticides and used for drawing water for use of pesticides shall be equipped with an effective device designed to prevent backflow."
- · List the product name of all proposed chemicals or mixtures and attach the Safety Data Sheet(s) for each. Also include projected application quantity on a per acre basis (or the total amount being applied) and the application method(s).
- § 3-3 (b) (c) "Any and all pesticide containers may not be burned, buried, abandoned or otherwise disposed of on lands within the boundaries of the Nation's Territories. Unwanted or unused pesticides in any quantity, dry or liquid, may not be burned, buried or otherwise disposed of on lands within the boundaries of the Nation's Territories."
- · Describe method(s) of mixing, storing, and/or removing chemicals (and their containers) from SNI territory.

# **SECTION 5: PESTICIDE APPLICATOR INFORMATION**

#### a. Sub-Contractor(s)/Hired Applicator (If Applicable):

- § 3-3 (b) "It shall be the responsibility of each Certified Applicator to acquaint those working under his/her direct supervision with the hazards involved in handling pesticides and to instruct such employees in the precautions to avoid such hazards."
- · Complete each field <u>in its entirety</u> as it pertains to the pest management business.
- · If application records are physically located at an address different than your business's physical location, enter the address of your records. Otherwise, enter SAME.
- $\cdot$  Enter the name and contact information for the person with **on-site** managerial authority with whom you would like our office to deal with regarding operational matters pertaining to your permit.

# **b.** Current Certifications / Licenses / Permits (Applicators)

- § 2-2 (c) "Each applicant applying for a Seneca Nation of Indians Pesticide Use Permit shall possess a valid commercial applicator certificate..."
- $\cdot$  Complete the fields provided for each applicator employed by the business who will be conducting work within Seneca Nation Territory boundaries.
- · Identify the applicable certifications, licenses, or permit numbers.
- · Identify the applicable category(s) for which each applicator is certified/licensed/permitted for. Categories recognized by the Seneca Nation include:

- 1a. Agricultural Plant \*
- 1b. Agricultural Animal \*
- 1c. Companion Animal \*
- 1d. Fumigation of Soil & Ag Commodities \*
- 2. Forest Pest Control
- 3a. Ornamentals/ Shade Trees & Turf
- 3b. Turf
- 3c. Interior Plant Maintenance
- 4. Seed Treatment
- 5a. Aquatic Vegetation Control \*
- 5b. Aquatic Insect Control \*
- 5c. Aquatic Fish Control \*

- 5d. Aquatic Antifouling Paints
- 5e. Sewer Line Root Control \*
- 6. Right-of-Way in Place Pole Treatments
- 7a. Structural & Rodent Control \*
- 7b. Fumigation \*
- 7c. Termite \*
- 7d. Lumber & Wood Products \*
- 7f. Food Processing \*
- 7g. Cooling Towers / Pulp & Paper Process \*
- 8. Public Health Pest Control
- 9. Demonstration & Research Pest Control
- 10. Aerial Pest Control \*
- \* The business must employ an applicator certified in that category. For all other categories, the business must employ an applicator or technician certified in that category.
- · Submit a photocopy of each valid certification, license or permit.

# c. Pesticide Handlers & Workers (Agriculture Only)

- § 3-4 (a) "It shall be the responsibility of each Certified Applicator to acquaint those working under his/her direct supervision with the hazards involved in handling pesticides and to instruct such employees in the precautions to avoid such hazards."
- § 3-4 (b) "It shall be the responsibility of each Certified Applicator to provide for the protection of employees, working under his/her direct supervision, the necessary safety equipment and protective clothing as set forth on the SNI EPD approved pesticide MSDS label."
- § 3-4 (c) "It shall be the responsibility of the Certified Applicator to inform those working under his/her direct supervision of any appropriate field re-entry requirements and to follow recommendations found on the SNI EPD approved MSDS pesticide label, as to re-entry intervals, safety requirements, signage, decontamination sites, residential notice, any other recommendations on label or directed by SNI EPD."
- · Complete the fields in their entirety for **each** applicator and worker employed by the business who are subject to the Worker Protection Standard (40 CFR Part 170).

# **SECTION 6: CERTIFICATION OF LIABILITY INSURANCE**

- § 2-2 (d) "Applicants for a Pesticide Use Permit shall carry a minimum of \$300,000.00 property damage insurance or a surety bond of comparable value in a form acceptable to the Seneca Nation of Indians as proof of financial responsibility.
- $\cdot$  Submit photocopies of proof of financial responsibility to cover claims of injury, death, or property damage resulting from pesticide use.
- · Acceptable proof shall consist of a valid certificate of liability insurance or a surety bond endorsed in favor of the Seneca Nation.
- · Coverages shall be at least \$300,000 for property damage, \$300,000 for individual, and \$1,000,000 per incident bodily injury.
- $\cdot \ Nation\ governmental\ departments/enterprises,\ regulated\ growers,\ and\ seed\ treaters\ are\ exempt\ from\ providing\ proof\ of\ financial\ responsibility.$

#### **SECTION 7: SUPPORTING DOCUMENTS**

- · Attachment A refers to the maps submitted from either the Seneca Nation Ag Land Parcel Map or the Map generated by WNY Crop Management (Ag Only).
- · Attachment B refers to the proof of insurance required by the Seneca Nation Pesticide Ordinance § 2-2 (d).
- · Attach copies of each applicator and technician that will be present on Seneca Nation Territory.

#### AGRICULTURAL ONLY.

- · Attach copies of each SDS for every chemical that will be used on Seneca Nation Territory as per the Seneca Nation Pesticide Ordinance § 3-3 (c).
- · Attach a copy of Business License as stated in the Seneca Nation Pesticide Ordinance § 2-2 (e).

# **SECTION 8: ACKNOWLEDGEMENT & CONSENT**

- · Read, sign, and date the Acknowledgement & Consent.
- · Gather all of the documents from Section 7 and staple or clip them in order to your application.
- · Submission of your completed application, applicable photocopies and payment shall be remitted to:

SNI BUSINESS PERMITS OFFICE ATTN: BUSINESS PERMIT OFFICER 12837 ROUTE 438 IRVING, NY 14081

· In the event of an emergency or needed assistance, the Seneca Nation Marshal's Dispatch is to be contacted: (716) 945-2779. The Marshal's office will be able to provide immediate assistance of any and all matters involving an emergency, needed assistance, or if one is met with resistance.