



Licence Application Form

Camilleri Underslab Pty Ltd - 72 Churchill Mines Road, Dundathu Qld 4650

Ph: 07 41215996

Fax 07 41216518

Email info@camilleriunderslab.com.au

Pest Control Operators Name: _____ Licence No: _____

Residential Address: _____

Postcode: _____

Business Delivery Address: _____

Postcode: _____

Business Name: _____

A.B.N. _____

Business P O Box: _____

Postcode: _____

Business Phone: _____ Business Fax: _____
(Incl Area Code) (Incl Area Code)

Email: _____ Mobile Phone: _____

Website: _____

Please print Email and Web Addresses carefully and be case specific

Signature of Applicant

Kindly post or fax this completed form back, together with a copy of your
PEST CONTROL OPERATOR LICENCE.

IMPORTANT- PRINT CLEARLY and ensure ALL SECTIONS have been completed.

www.camilleriunderslab.com.au