



Landscape Maintenance Certification Requirement Information for Landscape Maintenance Staff in Pinellas County

Any person or company providing landscape services (mowing, edging, tree service, pruning, debris management, etc.) **not** including fertilizer application must display a Pinellas County vehicle decal. Complete the steps below to avoid violation of the Pinellas County Fertilizer and Landscape Maintenance Ordinance. For information visit: www.pinellascounty.org/fertilizer

- **STEP 1:** Complete the Pinellas County Landscape Maintenance Best Management Practices 3-hour training. The course can be taken at the Pinellas County Extension by registering online at www.LandscapeBMP.eventbrite.com. If you need assistance with registration, please contact us at the numbers below.
- **STEP 2:** Upon course completion Pinellas County will issue a wallet size certification card and vehicle decal as notification that the landscaper is certified in Landscape Maintenance BMPs.

Classes are offered **once a month** in English and Spanish at the Pinellas County Public Works Campus, 22211 US Highway 19 N, Building 1, Clearwater and at anytime in English online at the link above.

Landscape Maintenance Affidavit for vehicle decal on next page below

For questions contact:

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Return completed with a copy of your Green Industries BMP certificate (or as part of the Landscape BMP class) to:
Pinellas County, Watershed Protection
22211 US HWY 19 N., Building 10
Clearwater FL 33765
Fax: 727-464-4403 Email: watershed@pinellascounty.org

Pinellas County Affidavit Landscape Maintenance Vehicle Decal

I _____ (print First and Last Name) am operating with the Business known as _____ performing landscape services within Pinellas County, Florida.

I acknowledge that I have received the Fertilizer Ordinance, Article XIII Chapter 58 of the Pinellas County Code.

I further acknowledge that all my activity pertaining to Landscape Maintenance Practices shall be conducted in accordance with these provisions and with the Pinellas County Best Management Practices for Landscape Maintenance for which I have been trained or certified.

Signature: _____ Date: _____

Required Business Information:

Business Mailing Address: _____

Business Phone Number: _____

Business Email: _____

Required Employee Information:

Date of Birth (MM/DD/YYYY): _____

Employee Home Phone Number: _____

Employee Email: _____

GIBMP Cert # _____ Class Date _____

Check if requesting **replacement** decal Check if requesting replacement **L-BMP** certificate

For Internal Use Only

I acknowledge receipt of the documents for the above named individual and issue the vehicle decal number _____ effective on the date below:

Pinellas County Landscape BMP Certificate OR

Green Industries BMP Certificate

County Witness Signature: _____ Date: _____