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| DARM-BACM-014 (rev. 09/2025) | | | | | | |
|  | Wisconsin Department of Agriculture, Trade and Consumer Protection  Division of Agricultural Resource Management  Bureau of Agrichemical Management  Phone: (608) 294-0557  Email: [DATCPPesticideRegistration@Wisconsin.gov](mailto:DATCPPesticideRegistration@Wisconsin.gov) | | | OFFICE USE ONLY | | |
| Date Received: | | |
| Date Active: | | |
| **Wisconsin 2026 New Minimum Risk Pesticide Product Registration Form** | | | | | | |
| *Personal information you provide may be used for purposes other than that for which it was originally collected. [Wis. Stat. § 15.04(1)(m)].*  *Completion of this form is necessary to add a product to your Pesticide Manufacturer and Labeler License. You must have or apply for a Pesticide Manufacturer and Labeler License using license application form DARM-BACM-012.* [Wis. Stat. §§ 15.04(1)(m), 94.68(2)(bm), and 94.68(3)]. | | | | | | |
| Wis. Stat. §§ 94.68 & 94.681. Wis. Admin. Code §§ ATCP 29.10 & 29.11 | | | | | | |
| For the license period ending December 31, 2026. | | License No. *(if known*): | | | | |
| BUSINESS NAME & MAILING ADDRESS | | | | | | |
| LEGAL BUSINESS NAME: | | | DOING BUSINESS AS NAME (D/B/A): | | | |
| REGISTRATION SPECIALIST: | | | EPA REGISTRANT OR SUB-REGISTRANT NUMBER: | | | |
| MAILING ADDRESS: | | | CITY: | | STATE: | ZIP CODE: |
| PHONE NUMBER:  (  )  - | | | EMAIL ADDRESS: | | | |
| **40 CFR 152.25 - *Exemptions for pesticides of a character not requiring FIFRA registration.*** | | | | | | |
| Products containing specific active and inert ingredients, and that meet specific labeling requirements, are exempt from the federal registration requirements of FIFRA, in accordance with the Environmental Protection Agency regulations. These products require registration in the state of Wisconsin and must be submitted using this form. | | | | | | |
| PRODUCT NAMES AS SHOWN ON PRODUCT LABELS | | | | | | |
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| Labels were submitted as text-searchable PDF documents, not scanned **copies,** via:  (Select at least one and complete the accompanying information) | | | | | | |
| Email ([DATCPPesticideRegistration@Wisconsin.gov](mailto:DATCPPesticideRegistration@Wisconsin.gov?subject=Wisconsin%202024%20New%20Pesticide%20Product%20Registration%20Form)) | | | Date Emailed: | | | |
| ALSTAR | | | ALSTAR Temp. State Prod. Number(s): | | | |
| **EMAIL completed form to:** [**DATCPPesticideRegistration@Wisconsin.gov**](mailto:DATCPPesticideRegistration@Wisconsin.gov) | | | | | | |
| FOR NEW COMPANIES ONLY:  Submit this form with a 2026 Pesticide Manufacturer and Labeler License Application (DARM-BACM-012). | | | | | | |