

FLORIDA TOMATO COMMITTEE

800 Trafalgar Court, Suite 300 • Maitland, FL 32751

Phone (407) 660-1949 • Fax (407) 660-1656

www.floridatomatoes.org

**APPLICATION FOR REGISTRATION AS AN
APPROVED RECEIVER OF SPECIAL PURPOSE SHIPMENTS**

20__ - 20__

The information on this form is kept confidential and used only to monitor shipments. Persons with disabilities who require alternative means of communication for program information should contact the Florida Tomato Committee at the phone number above.

Name of Supplier (Florida Registered Handler) _____

Name of Receiver _____

Receiver Contact Person _____

Receiver Telephone No. _____ Fax No. _____

Receiver Email Address _____

Receiver Address _____

Purpose of shipment (Check all applicable): Pickling Processing Charity or Relief Export
 Experimental purposes Other Committee Approved Purpose.

Receiver's physical address where stated privilege purpose is accomplished (i.e. pickling, processing, etc.), if different from above: _____

Does the receiver pack, repack or sell fresh tomatoes? Yes No

To the best of my knowledge and belief, all statements contained in this application are true, correct and complete. By making this application the receiver agrees that the tomatoes obtained herein will not be resold or transferred for resale, directly or indirectly, but will be used only for the purpose(s) specified above. The receiver further agrees to undergo random inspection and to submit such reports as is required by the Florida Tomato Committee.

Date_____
Name of Firm_____
Telephone Number_____
Signature of Applicant**DO NOT WRITE BELOW THIS LINE**

Approved Disapproved Date _____

Signature of Committee Manager _____

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0581-0178. The time required to complete this information collection is estimated to average 5 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

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Persons with disabilities who require alternative means of communication for program information (e.g., Braille, large print, audiotape, American Sign Language, etc.) should contact the responsible Agency or USDA's TARGET Center at (202) 720-2600 (voice and TTY) or contact USDA through the Federal Relay Service at (800) 877-8339. Additionally, program information may be made available in languages other than English. To file a program discrimination complaint, complete the USDA Program Discrimination Complaint Form, AD-3027, found online at http://www.ascr.usda.gov/complaint_filing_cust.html and at any USDA office or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call (866) 632-9992. Submit your completed form or letter to USDA by: (1) mail: U.S. Department of Agriculture Office of the Assistant Secretary for Civil Rights 1400 Independence Avenue, SW Washington, D.C. 20250-9410; (2) fax: (202) 690-7442; or (3) email: program.intake@usda.gov. USDA is an equal opportunity provider, employer, and lender.