

The Marketing Order for onions requires that handlers desiring to make shipments outside the production area to canners, dehydrators, extractors, freezers, and/or picklers, which do not meet the requirements for fresh shipments, shall prior to making such a shipment apply to the Committee for permission. A shipment may be made to a receiver without a COP Permit number, if the sale occurs after 5 pm, on a Holiday, or Weekend; provided, that both the handler and receiver have had prior approval and this Application is faxed to the Committee prior to shipment.

Receiver & Agent					Phone		
Contact Person(s)							
Address							
City			State			Zip	
Purpose of Shipment(s)	<input type="checkbox"/> Canning	<input type="checkbox"/> Dehydration	<input type="checkbox"/> Extracting	<input type="checkbox"/> Freezing	<input type="checkbox"/> Pickling		
Type of Sale	<input type="checkbox"/> Spot Sale <input type="checkbox"/> Contract Sale			Total cwt.			
Shipment Date(s)							
Container(s)	<input type="checkbox"/> 50 lb bags <input type="checkbox"/> Totes <input type="checkbox"/> Bins <input type="checkbox"/> Bulk <input type="checkbox"/> Other:						

I, the undersigned, hereby certify to USDA and to the Idaho-Eastern Oregon Onion Committee, that I have read, fully understand, and agree to comply with 7 CFR §958.328 which governs the handling of onions, and further agree that none of these special purpose onions will be diverted to any fresh market outlet(s). To the best of my knowledge all statements in this Application are true and complete. In addition, I will prepare an Onion Diversion Report for each Application and submit it to the Committee. The Committee reserves the right to audit the receiver or their agent randomly to verify shipments. Falsification of information on this government document may result in a fine of not more than \$10,000 or imprisonment of not more than five (5) years, or both (18 U.S.C. 1001).

Signature				Name			
Title				Date			
Firm					Phone:		
Address							
City			State			Zip	

COMMITTEE ACTION

APPROVED NOT APPROVED Reason not approved: _____

COP Permit No. _____ Date Approved: _____ Manager: _____

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