

FLORIDA TOMATO COMMITTEE

*Established Pursuant to Federal Marketing Agreement and Order No. 966, As Amended
Regulating the Handling of Tomatoes*

800 Trafalgar Court, Suite 300

Maitland, Florida 32751

www.floridatomatoes.org

Telephone (407) 660-1949

Fax (407) 660-1656

[Insert Date]

To: All 20XX-20XX Registered Tomato Handlers
From: Reggie Brown, Manager
Subject: 20XX-20XX Tomato Handler Registration

We are enclosing an application for registration as a Tomato Handler during the 20XX-20XX season, as required under Marketing Order No. 966. Each handler who applies for inspection must be registered with the Committee, pursuant to §966.7. Registered handlers are the first handlers of tomatoes and must pay assessments as provided in §966.42. Application for this registration must be done annually.

Upon receipt and approval of your application, a new Registered Handler Certificate for the 20XX-20XX season will be mailed to you.

Enclosures

cc: Mr. Robert C. Keeney
Mr. Chris Nissen
Ms. Shannon Shepp
Federal-State Inspection Supervisors
FTC Members and Alternates

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REMINDER

[Insert Date]

To: All 20XX-20XX Registered Tomato Handlers Who Have Not Yet Registered for the
20XX-20XX Season

From: Reggie Brown, Manager

Subject: 20XX-20XX Tomato Handler Registration

We are enclosing an application for registration as a Tomato Handler during the 20XX-20XX season, as required under Marketing Order No. 966. Each handler who applies for inspection must be registered with the Committee, pursuant to §966.7. Registered handlers are the first handlers of tomatoes and must pay assessments as provided in §966.42. Application for this registration must be done annually.

Upon receipt and approval of your application, a new Registered Handler Certificate for the 20XX-20XX season will be mailed to you.

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cc: Mr. Robert C. Keeney
Mr. Chris Nissen
Ms. Shannon Shepp
Federal-State Inspection Supervisors
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**20XX-20XX
APPLICATION FOR REGISTRATION AS TOMATO HANDLER**

FLORIDA TOMATO COMMITTEE
800 Trafalgar Court, Suite 300
Maitland, FL 32751
Phone (407) 660-1949 • Fax (407) 660-1656

Gentlemen:

I hereby make application for Registration as a Tomato Handler for the 20XX-20XX season.

1. Physical address of all location(s) of grading and packing facilities in the production area:

2. Type of business (Individual, Firm, Partnership, Corporation, Co-operative, Association or other business unit):

3. If other than individual, show below names and addresses of the officers, partners, or other individuals having a financial interest in the business with the applicant.

<u>Name</u>	<u>Title</u>	<u>Address, City, State, Zip</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

4. How many years has applicant been engaged in the tomato business in Florida? _____

Business Name of Applicant: _____

Street Address: _____

City, State, Zip Code: _____

Mailing Address: _____

City, State, Zip Code: _____

Telephone Number: _____ FAX Number: _____

Email address: _____

By: _____
(Authorized Signature and Title)

_____ Please Print Name

Note: The following statements are made in accordance with the Privacy Act of 1974 (5 U.S.C. 552a) and the Paperwork Reduction Act of 1995. The authority for requesting this information to be supplied on this form is the Agricultural Marketing Agreement Act of 1937, Secs. 1-19, 48 Stat. 31, as amended, (7 U.S.C. 601-674). Furnishing the requested information is necessary for the administration of the marketing order program.

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.

The U.S. Department of Agriculture (USDA) prohibits discrimination in all its programs and activities on the basis of race, color, national origin, age, disability, and where applicable, sex, marital status, familial status, parental status, religion, sexual orientation, genetic information, political beliefs, reprisal, or because all or part of an individual's income is derived from any public assistance program (Not all prohibited bases apply to all programs.) Persons with disabilities who require alternative means for communication of program information (Braille, large print, audiotape, etc.) should contact USDA's TARGET Center at (202) 720-2600 (voice and TDD).

To file a complaint of discrimination, write to USDA, Director, Office of Civil Rights, 1400 Independence Avenue, S.W., Washington, D.C. 20250-9410, or call (800) 795-3272 (voice) or (202) 720-6382 (TDD). USDA is an equal opportunity provider and employer.

CRITICAL INFORMATION REQUEST

Please provide the information below for each grower who you expect will be shipping through your packing facility for the 20XX-20XX season. This information is needed to ensure that your growers are kept up-to-date on Committee activities and on subjects affecting the Florida Tomato Industry as a whole, such as: Medfly alerts; government regulations; labor situations; market conditions; etc. Return this form with your application for registration as a tomato handler.

GROWER NAME _____
CONTACT NAME _____
ADDRESS _____
CITY, STATE, ZIP _____
TELEPHONE _____

GROWER NAME _____
CONTACT NAME _____
ADDRESS _____
CITY, STATE, ZIP _____
TELEPHONE _____

GROWER NAME _____
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GROWER NAME _____
CONTACT NAME _____
ADDRESS _____
CITY, STATE, ZIP _____
TELEPHONE _____

(Make additional copies or use other side to list additional growers if necessary.)

GROWER NAME _____
CONTACT NAME _____
ADDRESS _____
CITY, STATE, ZIP _____
TELEPHONE _____

GROWER NAME _____
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