

# REDUCED REPORTING APPLICATION

HONEY RESEARCH, PROMOTION AND CONSUMER INFORMATION ORDER

**THIS APPLICATION IS FOR "LOW VOLUME" PRODUCER-PACKERS** (UNDER 100,000 POUNDS OF OWN PRODUCTION PACKED IN A YEAR). When approved for this program, you will only need to report twice a year on your own production/packing activity.

1. Persons **eligible** for reduced reporting include:

Producer-packers who act as the first handler on less than 100,000 pounds of their own honey production annually are **eligible** for this program. (This may include producer-packers who produce 100,000 or over who sell some of their honey to another first handler or purchase honey from other producers in excess of the 100,000.

2. Persons wishing **to apply** for reduced reporting must perform the following:

- a. Fill out information below
- b. Return this application to the National Honey Board
- c. Receive from the Honey Board a "Reduced Reporting Authorization" upon approval of application and two "Transaction Report" forms
- d. Submit Transaction Reports as explained below

3. Persons approved for reduced reporting **must report** to the National Honey Board as follows:

- a. On the portion of your own honey production that you pack yourself: send one transaction report by July 15 (for January through June) and one by January 15 (for July through December) to the National Honey Board for each year.
- b. These reports should represent the total pounds "prepared" during the half-year period. In totaling the pounds for the period, the "prepared" pounds may be on the basis of pounds extracted, packed or sold. However, once you choose, please always report on this basis.
- c. On purchases of another producer's honey: Fill out one transaction report for each purchase and send it to the NHB by the 15th of the month following purchase.
- d. On any portion of your own honey production that you sell in bulk to another handler: that handler should fill out the transaction report on this honey purchase.

**APPLICANT, FILL OUT THE FOLLOWING**

\_\_\_\_\_  
Company Name and Tax ID or Employer ID No.

\_\_\_\_\_  
First, Middle and Last Name and County

\_\_\_\_\_  
Street Address, City, State and Zip

**I HEREBY CERTIFY THAT I ACT AS THE FIRST HANDLER ON LESS THAN 100,000 POUNDS OF MY OWN HONEY PRODUCTION IN A CALENDAR YEAR. I UNDERSTAND THAT I MUST SUBMIT A TRANSACTION REPORT TWICE A YEAR ON THIS ACTIVITY, ONE BY JULY 15 AND ONE BY JANUARY 15 FOR EACH SIX MONTH PERIOD. I ALSO UNDERSTAND THAT I MUST SUBMIT A TRANSACTION REPORT FOR EACH PURCHASE FROM ANY OTHER PRODUCER OR IMPORTER MONTHLY.**

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

The following statements are made in accordance with the Privacy Act of 1974 (U.S.C. 522a) and the Paperwork Reduction Act of 1995, as amended. The authority for requesting this information to be supplied on the form is the Honey Research, Promotion, and Consumer Information Act (7 U.S.C. 4601-4613). Furnishing the requested information is necessary for the administration of this program. Submission of the Tax Identification Number (TIN) or Employer Identification Number (EIN) is mandatory, and will be used to determine affiliation or entity identity.

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 0581-0093. The time required to complete this information collection is estimated to average 3 minutes/hours 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.