

Application for a Certificate of Privilege by a Special Purpose Shipper

Date: _____ 20, ____

This certificate number _____ for a Certificate of Privilege as a Special Purpose Shipper is hereby approved for the period _____, 20__ through _____, 20__.

By: _____
Manager, Citrus Administrative Committee

FAILURE TO COMPLY WITH ANY OF THE CONDITIONS STATED IN THIS DOCUMENT IS GROUNDS FOR IMMEDIATE TERMINATION OF THIS CERTIFICATE OF PRIVILEGE.

NOTE: 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 0581-0189. 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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