

U.S. Department of Agriculture
 Agricultural Marketing Service
 Dairy Program

Dairy Grading Program
 Fax: 630-437-5060
 Email: DairyNFO@ams.usda.gov

Mail To: USDA, AMS, DAIRY
 2150 Western Ct.
 Suite 100
 Lisle, IL 60532

Request for Applicant Number

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NOTE: 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 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 this program. Submission of the Tax Identification Number (TIN) is mandatory, and will be used to determine affiliation or entity identity.

1. COMPANY NAME: AS REGISTERED WITH IRS					
2. DOING BUSINESS AS NAME: IF APPLICABLE					
3. FEDERAL TAX ID NUMBER:					
4. BILLING ADDRESS LINE 1:		Attn: Accounts Payable (A/P)			
5. ADDRESS LINE 2:					
6. CITY:		STATE:		ZIP+4:	
7. A/P CONTACT:					
8. A/P PHONE:			EXT:		
9. A/P FAX:					
10. A/P E-mail ADDRESS:					
COMPANY MAILING ADDRESS (if different than Billing address)	11. P.O. BOX and/or STREET ADDRESS				
	12. CITY, ST ZIP (+4)				
13. CONTACT FOR MAILING ADDRESS (if different than Billing):					
14. E-MAIL FOR CONTACT (if different than Billing):					

Requested By: _____

Expedite

*Expedite fee at 1 hour inspection rate will be applied to account.

Date Requested: _____

Service Types That Will Be Needed (Check All That Apply)

Grading Certificates

Plant Approval Status

Export Certificates

Equipment Inspection

COMMENTS: