# Instructions For WA-400

## ADDENDUM TO THE TERMS AND CONDITIONS OF THE LICENSING OR PROVIDER AGREEMENT

### This form is used by the Kansas City Commodity Office staff to alter the provisions of the standard Licensing Agreement with a warehouse operator or the standard Provider Agreement with a provider.

### This form is generally prepared by the Licensing Branch and sent to the warehouse operator and its parent corporation for execution and submission of the original completed form in hard copy or facsimile submitted to the Kansas City Commodity Office (KCCO), Warehouse License and Examination Division, STOP 9148, P.O. Box 419205, Kansas City, MO 64141-6205; or FAX 816-926-1774, for acceptance and licensing.

## Generally prepared by Kansas City Commodity Office and provided to the warehouse operator or provider for signature of acceptance.

#### Items 1A through 3D are for FSA use only.

| Fld Name / Item No. | Instruction |
| --- | --- |
| 1A & B  License Number… | Item 1A. Enter USWA license number.  Item 1B. Enter the initials of the person creating the document. |
| 2  Amended and Modified Terms and Conditions… | Enter the amended and/or modification of the terms of the agreement. For additional terms use item 6 on page two. |
| 3(a) - (d)  Addendum amends and modifies… | Item 3(a). Enter the License or Agreement Number.  Item 3(b). Name of Legal Entity. This name is either the Warehouse Operator's Name or the Provider Agreement holder’s full legal name and type of organization. **See examples below**:  **Example 1**: For a **proprietor**, enter, for example “*Susan Doe*.”  **Example 2**: For a **corporation**, enter, for example, *“Does, Inc.*”,  “*a* [state of incorporation ]*corporation*”.  **Example 3**: For a **general partnership**, enter, for example “*Letitia Doe, Frank Doe, Selma Doe, and James Doe, co-partners,*  *trading as Doe Farms* *under the laws of* [the State under whose  laws the partnership is organized]”  **Example 4**: For a **limited partnership**, enter, for example “*Doe Farms Limited Partnership under the laws of* [the State of organization and under whose laws you operate] *Selma Doe, General Partner*”.  **Example 5**: For a **limited liability company**, enter, for example  “*Doe Farms, L.L.C., a* [the name of the State under which  organized] *limited liability company*”.  Item 3(c ). Enter the Warehouse Operator’s location [city and State] or, in the case of a Provider, “ILB” for intentionally left blank.  Item 3(d). Enter the effective date *(MM-DD-YYYY)* of the change. |

#### Items 4A through 4D is completed by the Warehouse Operator or Provider

| Fld Name / Item No. | Instruction |
| --- | --- |
| 4(a) – (d)  Warehouse Operator or Provider | Item 4(a). Enter the Warehouse Operator Name or Provider Agreement holder’s name. See Item 3(b) above.  Item 4(b). Signature of person having the authority to bind the ware-house operator or provider in a legal contract. **See examples of who can sign below**:  **Example 1**. For a corporation, a signature resolution must be on file or a signature resolution must be sent with the bond for  execution.  **Example 2**. Partnerships require signatures of all partners.  **Example 3**. General partner signs for a limited partnership.  **Example 4**. LLC signature is according to the organizing  documents.  Item 4(c). Enter the title of the signer.  Item 4(d). Enter the date of signature. |

#### Completed by FSA

| Fld Name / Item No. | Instruction |
| --- | --- |
| 5(a) – (c)  FSA Signature, Title and Date | Item 5(a). Enter the signature of the authorized FSA official.  Item 5(b). Enter the title of the authorized FSA official.  Item 5(c). Enter the date *(MM-DD-YYYY)* signed. |