U.S. DEPARTMENT OF AGRICULTURE GRAIN INSPECTION, PACKERS AND STOCKYARDS ADMINISTRATION
PACKERS AND STOCKYARDS PROGRAM

APPLICATION FOR REGISTRATION PACKER BUYER

PACKERS AND STOCKYARDS PROGRAM	(Under the Packers and Stockyards Act		
Please Print or Type			
(1) Name of Applicant to Be Regis	tered (Individual or Firm)	(2)	
(3a) Mailing Address			
(3b) City		(3c) State	(3d) Zip Code
(4a) Operating Address (if different	t from mailing address listed above)		
(4b) City		(4c) State	(4d) Zip Code
(5a) County	(5b) Country		
(6) Telephone No.	(7) Cell No.	(8) Fax No.	
(9) E-mail Address			
(10) Livestock to Be Purchased (ch	ack all that apply)		
☐ Feeder Cattle	☐ Cows and Bulls	☐ Sheep and	l Coate
☐ Fed Cattle	☐ Calves	☐ Horses an	
☐ Steers and Heifers	☐ Swine	in noises all	u Mules
(11) Names and locations of posted	stockyards, feedlots, or web sites wh	iere you will pi	ırchase livestock
(12) If you operate a buying station for your employer, list name and location			
(13) If previously registered, list all registered name(s) and address(es)			
(14a) Do you own an interest in oth	ner dealer organization(s), market age	ncv(s) stockya	ord company(s) or
packing company(s)?	8(-),	(-),	
☐ Yes (complete table below)	☐ No (go to item	15 in the form	1)
, ,			1
(14b) Name of other Organization	(14c) Location (City, State, Zip	o Code)	(14d) Percent of Control by Applicant

(15a) Signature of Applicant (15b) Title (if any) (15c) Date For Completion By Packer-Employer The above applicant is employed by our firm to buy the livestock identified in item no. 10 for slaughter purposes only. (16b) Official Title (16a) Signature (16f) Date (16c) Name of Firm (16d) Address (16e) Telephone No. Do Not Complete: For Official Use Only Registration No. Registered As Dealer Remarks

Certification: To the best of my knowledge and belief, the foregoing statements are true and correct.

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Registration is required in order to operate as a market agency or dealer as defined in Section 301 (7 U.S.C. 201) of the Packers and Stockyards Act, 1921, as amended and supplemented and 9 CFR 201.10 (a). Information held confidential (9 CFR 201.96). According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information is 0580-0015. The time required to complete this information collection is estimated to average .50 hours per response, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection.