

UNITED STATES DEPARTMENT OF AGRICULTURE Agricultural Marketing Service Fruit and Vegetable Programs

## POSITIVE LOT IDENTIFICATION STAMP(S)/DIE(S) REQUEST FORM

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 number. The valid OMB number for this information is 0581-07125. The time required to complete this information collection is estimated to average one hour per response, including the time for reviewing the instruction, searching existing data sources, gathering and maintaining data needed, and

completing an	d reviewing the collection of information	mateu to average one nour per respo				<b>3</b>
	Description		1			
Stamp Location (Applicant):			Stan	np Manufactur	er:	
<u> </u>						
i —		-				
Stamp M	anufacturer: Please reproduce, at the	Applicant's expense.	hand stamps o	r in-lir	ne coder printing die	es bearing the approved
	ederal-State Inspection logo with the fo					3 : : : : : : : : : : : : : : : : : : :
			House	District	Inspection   C	Office/Market
			Number	Number	Number	Number
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400				'	ı	•
		Inches				
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<b>I</b> ◆	Inches	→				
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	ant's Request					
As a duly	authorized agent of the above firm (A	pplicant), I hereby requ	est that the above stam	np/die order be a	approved and produ	iced. I/We agree to be
	ble for all charges assessed by the star		s order. I also acknowl	ledge that all sta		
of the Un	ited States Department of Agriculture a	and/or the			⊢edera	I-State Inspection Service.
	Applicant's Authorization Sign	ature			Date of	<sup>f</sup> Request
E-Mail A	ddress:					
C. State/D	istrict Authorization					
I have re	viewed the above request and give app	proval for the order to b	e processed.			
	State/District Authorization Signature				Date of Re	eauest
D. Federa	I Authorization					•
	s/dies which make reference to or imp	ly that a product has be	en USDA or Federal-S	State inspected a	are accountable iten	ns and are the property of
	d States Department of Agriculture. N					
Supervis		'	·			3
	Federal Program Manager / Supervis	sor's Signature	<del></del>		Date of Auth	orization
NOTE:	These stamps/dies are to be					
	mailed to the Federal-State District	İ				
	Supervisor who will distribute	MAIL STAMPS/DIES	то			
	them.		'			
		1	<u> </u>			
E. Manufa	cturer's Statement					
I certify the	nat each stamp/die produced by this fir	m bears a permanent a	accountability number a	and the only star	mps/dies produced l	by this firm with markings
referenci	ng the USDA and/or the	Federal-S	State Inspection Service	e are those that	have been authoriz	ed in writing by the USDA.
Mar	ufacturer's Signature of Compliance		Title			Date of Shipment
	istrict Receipt					
I have re	ceived (quantity) sta	mp/dies bearing the fo	llowing permanently aff	fixed accountable	ility number(s).	
	(qaaaaay) saa				(-).	
	<del></del>					
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<b>.</b>	District Supervisor's Signature				Date Received	
	ized PIQ-PLIDS Firm Representative/Insp	•				
I have re	ceived the above listed stamps/dies an	d they are now my res	oonsibility.			
	Authorized Signature Partment of Agriculture (USDA) prohibits discrimination				Date Received	

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