

<p align="center">U.S. Department of Agriculture Agricultural Marketing Service Livestock and Seed Program</p>	<p align="center">Grading and Verification Division</p> <p>USDA, MRP, AMS, LSP, GV Division 13952 Denver West Parkway Building 53, Suite 350 Lakewood, CO 80401</p> <p align="right">Fax: 720-497-0571 Email: GVD@ams.usda.gov</p>
<p align="center">Application for Service</p>	

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The undersigned hereby applies to the Grading and Verification Division, Livestock and Seed Program, U.S. Department of Agriculture, for the furnishing of official services to be provided at the following location:

Name of Applicant:	Tax ID Number (Required by IRS). Corporate Tax ID number unless Applicant is an Individual, then Social Security Number.
Billing Address (Include P.O. Box or Street, City, State, and Zip Code)	Physical Address of Service Location (no P.O. Box)
Telephone Number	
Fax Number	
Email Address	

<input type="checkbox"/> Grading Services Type of Service Required (Check all that apply) <input type="checkbox"/> Carcass Grading (check applicable species) <input type="checkbox"/> Beef <input type="checkbox"/> Pork <input type="checkbox"/> Veal/Calf <input type="checkbox"/> Lamb <input type="checkbox"/> Product Certification <input type="checkbox"/> Carcass Grade Factor Further <input type="checkbox"/> Processing <input type="checkbox"/> Meat Judging Contest <input type="checkbox"/> Product Examination Service <input type="checkbox"/> Other (Specify) _____	<input type="checkbox"/> Verification Services Type of Service Required (Check all that apply) <input type="checkbox"/> Process Verified Program (PVP) <input type="checkbox"/> Quality System Assessment Program <input type="checkbox"/> (QSA) Export Verification (EV) Program <input type="checkbox"/> Non-Hormone Treated Cattle (NHTC) <input type="checkbox"/> Program Pork for the European Union (PFEU) <input type="checkbox"/> Program USDA ISO Guide 65 Program <input type="checkbox"/> National Organic Program (NOP) <input type="checkbox"/> Seed Accreditation Programs (ASL, AFIP, ASSP) <input type="checkbox"/> Other (Specify) _____
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Inspection Information: FSIS Est. No. _____ or NFI Est. No. _____

Operations Conducted:

Slaughter (Identify Species) Cattle Veal Calves Sheep Swine Bison Goats Other _____

Processing Fabrication Distribution Breeding Support Services Marketing Feeding Other _____

Legal Status (Check One) <input type="checkbox"/> Individual Owner <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation <input type="checkbox"/> Other (Specify) _____	Financial Interest In <input type="checkbox"/> Owner/Part Owner <input type="checkbox"/> Other _____ Product: <input type="checkbox"/> Contractor
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<input type="checkbox"/> I (We) agree to: 1. To comply with all applicable provisions of the Federal Meat Grading and Certification Regulations, 7 CFR, Part 54 (Revised), a copy of which I (we) have received and read; 2. To notify the Customer Service Director, in writing and in advance of my (our) cancellation of this application; 3. To notify the Customer Service Director immediately when a change occurs in my (our) legal status/Applicant Representative; and 4. That the Federal meat grading certification service for which application is hereby made may be denied or withdrawn at any time as provided in the Federal Meat Grading and Certification Regulations	<input type="checkbox"/> I (We) agree to: 1. To comply with all applicable provisions of the Quality Systems Verification Programs, 7 CFR, Part 62, a copy of which I (we) have received and read; 2. To notify the Audit, Review, and Compliance Branch in writing and in advance of my (our) cancellation of this application; 3. To notify the Audit, Review, and Compliance Branch immediately when a change occurs in my (our) status/Applicant Representative; and 4. That the quality system verification service for which application is hereby made may be denied or withdrawn at any time as provided in the Quality Systems Verification Programs.
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Signature of Applicant or Representative	Date
Print or Type Name of Signee	
Title of Signee	

Information provided in this application is needed to authorize USDA employees to perform the requested service (7 CFR 54, 6, & 7 CFR 62). You may by law, be fined up to \$10,000, imprisoned up to 5 years, or both for knowingly or willfully making false statements within this document (18 U.S.C. Section 1001).

For Official Use		
Date Of Approval	Title of Approving Officer	Signature of Approving Officer