**FAR WEST SPEARMINT OIL ADMINISTRATIVE COMMITTEE**

**100 N. Fruitland, Suite B**

**Kennewick, WA 99336**

**Phone: (509) 585-5460; Fax: (509) 585-2671**

**20\_\_\_ - 20\_\_\_ APPLICATION FOR NEW ALLOTMENT BASE**

**CLASS 1 – SCOTCH**

**(Please read reverse side BEFORE filling out Application)**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name (Please Print) Age Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address Telephone No.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City State Zip Code Place of Employment

Briefly explain your present involvement in your farm. In order to be eligible, the applicant must be CURRENTLY involved in farming. See Item No. 2 on the reverse side.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If drawn, where will you plant the spearmint? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (County) \_\_\_\_\_\_\_\_\_\_ (State)

Who will distill the spearmint? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Still Owner)

Briefly explain how you will meet Item No. 3 on the reverse of this application and the financial interests you will have in the production of the oil. (Include land or equipment ownership, or, if applicable, planned leasing arrangements).

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I certify to the Far West Spearmint Oil Committee (Committee) and the Secretary of the U.S. Department of Agriculture that the above information is true. I further certify that I have read the letter on the reverse side of this application form and that I meet each qualification stated therein.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature

Making false certification, knowing it to be false, to the U.S. Government is a violation of title 18, section 1001 of the United States Code.

**THE APPLICATION MUST BE RETURNED BY AUGUST \_\_, 20\_\_\_.**

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 control number. The valid OMB control number for this information collection is 0581-0178. The time required to complete this information collection is estimated to average 5 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

The U.S. Department of Agriculture (USDA) prohibits discrimination in all its programs and activities on the basis of race, color, national origin, age, disability, and where applicable, sex, marital status, familial status, parental status, religion, sexual orientation, genetic information, political beliefs, reprisal, or because all or part of an individual’s income is derived from any public assistance program (Not all prohibited bases apply to all programs.) Persons with disabilities who require alternative means for communication of program information (Braille, large print, audiotape, etc.) should contact USDA’s TARGET Center at (202) 720-2600 (voice and TDD).

To file a complaint of discrimination, write to USDA, Director, Office of Civil Rights, 1400 Independence Avenue, S.W., Washington, D.C. 20250-9410, or call (800) 795-3272 (voice) or (202) 720-6382 (TDD). USDA is an equal opportunity provider and employer.

TO: Applicants for New Allotment Base:

In order to qualify for Allotment Base as a new grower, you must apply on the form on the reverse side of this notice. The form must be filled out completely or it will not be included with the eligible growers. In keeping with the stated intent of section 985.153(c) of the Marketing Order, the Committee must determine whether or not the applicant has the ability to produce spearmint oil. To be eligible as a new grower, there are several requirements that must be met. **If you would be disqualified for *any one* of the following, please do not apply.**

1. The applicant must not now be, nor in the past have been, involved in the ownership of base (i.e., a part of a corporation, partnership, or any other business entity that has owned, or currently owns base).
2. **The applicant must be able to show present involvement in farming (i.e., they must already have their own capital at risk and be involved in the day-to-day activities associated with their own farming operation before they can apply for spearmint base). They must be able to produce the appropriate class of spearmint oil and, if requested, be able to submit evidence showing that they will have a proprietary (financial) interest in the production of the oil.**
3. **The growers who are drawn for new base will have to have acres planted by the spring of 20\_\_\_**. The Marketing Order requires that the production of this spearmint be independent of any other producer. It is important that applicants carefully consider their ability to produce their own oil by next year. Failure to do so could result in the loss of their base.
4. **Only one applicant is allowed per business unit.**
5. The applicant must be a citizen of the United States.
6. The applicant must be 18 years of age or older.
7. Recipients of new base will not be able to transfer the base to another entity during the first two years following the year of issuance of the new base. They must satisfy the bona fide effort requirement during each of these two years.

ALL APPLICANTS WILL BE CAREFULLY SCREENED PRIOR TO THE DRAWING. THOSE NOT MEETING THE BASIC REQUIREMENTS AS STATED ABOVE WILL BE NOTIFIED OF SUCH AND TAKEN OUT OF THE LOT. THOSE APPLICANTS WHO ARE DRAWN WILL BE CHECKED MORE CLOSELY, AND, IF IT IS FOUND THAT THEY DO NOT MEET THE REQUIREMENTS, WILL BE DEEMED INELIGIBLE FOR THE NEW BASE. IF THE APPLICANT IS DEEMED INELIGIBLE, THE COMMITTEE MAY REDRAW THE BASE FOR THAT REGION.

If you have any questions concerning the application or drawing, please call the Committee at (509) 585-5460.

|  |
| --- |
| **All applications must be submitted to the office by August \_\_, 20\_\_\_. The drawing will be held August \_\_, 20\_\_\_, at 11:30 a.m. at the Committee office at 100 North Fruitland, Suite B, Kennewick, WA 99336.** |

Thank you,

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Manager