

U.S. DEPARTMENT OF AGRICULTURE  
 FOOD SAFETY AND INSPECTION SERVICE  
 OFFICE OF INVESTIGATION, ENFORCEMENT AND AUDIT

**REGISTRATION OF  
 MEAT AND POULTRY HANDLERS**

**DISTRIBUTION:** RETAIN ONE COPY FOR YOUR FILES, AND RETURN ONE COPY OF THIS FORM TO:

USDA, FSIS, OIEA, ELD  
 1400 Independence Avenue, SW  
 Stop Code 3753, PP3, Cubicle 8-235A  
 Washington, D.C. 20250-3700  
 EPBCorrespondence@fsis.usda.gov

**NOTICE TO MEAT AND POULTRY HANDLERS**

Unless you operate under Federal Inspection, you are required by law to register with the U.S. Department of Agriculture if you deal in meat or poultry products or Siluriformes in or for commerce. (The term "commerce" means commerce between any State, any territory, or the District of Columbia, and any place outside thereof; or within any territory not organized with a legislative body, or the District of Columbia, or within a State or Territory that has been designated for 21 U.S.C. 643 and/or 21 U.S.C. 460 because such State or Territory does not operate a program of its own.)

**INSTRUCTIONS:** Complete items 1 through 10 and send 2 copies to the address in the upper right corner. USDA will return one copy of the completed registration to the registrant in item 2.

1. Check the "original" box to indicate first time registration or check the "update" box for any changes to original form and highlight the changed information.  
 (When submitting an update, please specify the registration number.)

ORIGINAL

UPDATE

REGISTRATION NO. \_\_\_\_\_

2. NAME AND MAILING ADDRESS OF REGISTRANT (Include Zip Code)

\_\_\_\_\_

2a. PHYSICAL ADDRESS OF REGISTRANT (Include Zip Code) (if different from # 2.)

\_\_\_\_\_

PHONE:

\_\_\_\_\_

E-MAIL:

\_\_\_\_\_

3. FORM OF ORGANIZATION (Check or specify)

INDIVIDUALLY OWNED

LIMITED LIABILITY CORPORATION

COOPERATIVE ASSOCIATION

INCORPORATED

PARTNERSHIP

OTHER Specify \_\_\_\_\_

4. NATURE OF BUSINESS (Check all that apply)

MEAT OR MEAT PRODUCTS

POULTRY OR POULTRY PRODUCTS

SILURIFORMES FISH OR SILURIFORMES FISH PRODUCTS

5. CHECK EACH TYPE OF BUSINESS YOU ARE ENGAGED IN

DOMESTIC BROKER

IMPORT BROKER

RENDERER

ANIMAL FOOD MANUFACTURER

PUBLIC WAREHOUSEMAN

WHOLESALE

SILURIFORMES FISH FARM/POND

SILURIFORMES FISH TRANSPORTER

Buying, selling, transporting, or importing any dead, dying, disabled, or diseased amendable species or parts of the carcasses of any such amenable species that died otherwise than by slaughter. (4D operator)

6. Address(es) of subsidiaries, branches, or divisions of your organization which engage in business of the type identified in Item 4. Include trade or other names if different from your organization's. (If none, state none)

\_\_\_\_\_

PHONE:

\_\_\_\_\_

E-MAIL:

\_\_\_\_\_

HOURS OF OPERATION

\_\_\_\_\_

**CHANGES:** If you make any changes in the names, including trade names, or addresses of the place or places where you do business, report such changes within 15 days to address in upper right corner.

**CERTIFICATION BY FIRM OFFICIAL**

7. TYPED OR PRINTED NAME

\_\_\_\_\_

8. TITLE

\_\_\_\_\_

9. SIGNATURE

\_\_\_\_\_

10. DATE

\_\_\_\_\_

**NOTICE OF REGISTRATION BY USDA (COMPLETED BY USDA OFFICIAL)**

a. REGISTRATION NO.

b. DATE OF REGISTRATION

c. TITLE OF USDA OFFICIAL

d. SIGNATURE OF USDA OFFICIAL

**INSTRUCTIONS FOR FSIS FORM 5020-1,  
REGISTRATION OF MEAT AND POULTRY HANDLERS**

**OFFICIAL OF THE "MEAT AND POULTRY HANDLING" FIRM REQUIRED TO REGISTER: COMPLETE  
BLOCKS 1-10 BEFORE SUBMITTING THE FORM TO FSIS.**

- Block 1. Check the box that best describes the nature of the application (original for first time registrations), or update to request changes (specify the registration number and highlight the changes).
- Block 2. Enter the entire name and mailing address of the registering firm, include the phone number and an e-mail address.
- Block 2a. Enter the physical address of the registering firm (*if different from #2*).
- Block 3. Check the box that describes the "Form of Organization" of the registering firm's organization.
- Block 4. Check the box that best describes the nature of the registrant's business.
- Block 5. Check all the boxes that describe the "Type of Business" that the registrant is engaged in.  
Note: Only those Siluriformes farms/ponds and transporters sending fish to FSIS inspected establishments are to register. If your farm/pond or your transportation does not supply to an FSIS inspected establishment, you do not need to register those farms/ponds or transporters.
- Block 6. Enter the address or addresses of subsidiaries, branches, or divisions of the registrants as names, trade names, or names that are different than the name entered in block 1. Include the phone number, an e-mail address, and the hours of operation for each subsidiary, branch, or division. Attach additional sheets if necessary.
- Block 7. Print or type the name of the registering official.
- Block 8. Print or type the title of the registering official.
- Block 9. Signature of the registering official (can be signed electronically or printed and signed).
- Block 10. Enter the date when the registering official signs the form.