

**FLORIDA TOMATO COMMITTEE**

800 Trafalgar Court, Suite 300 • Maitland, FL 32751  
 Phone (407) 660-1949 • Fax (407) 660-1656  
 www.floridatomatoes.org

**APPLICATION FOR REGISTRATION AS AN  
 APPROVED RECEIVER OF SPECIAL PURPOSE SHIPMENTS  
 20\_\_ - 20\_\_**

**The information on this form is kept confidential and used only to monitor shipments.**

Name of Supplier (Florida Registered Handler) \_\_\_\_\_

Name of Receiver \_\_\_\_\_

Receiver Contact Person \_\_\_\_\_

Receiver Telephone No. \_\_\_\_\_ Fax No. \_\_\_\_\_

Receiver Email Address \_\_\_\_\_

Receiver Address \_\_\_\_\_

Purpose of shipment (Check all applicable):  Pickling       Processing       Charity or Relief       Export  
 Experimental purposes       Other Committee Approved Purpose.

Receiver's physical address where stated privilege purpose is accomplished (i.e. pickling, processing, etc.), if different from above: \_\_\_\_\_

Does the receiver pack, repack or sell fresh tomatoes?  Yes       No

To the best of my knowledge and belief, all statements contained in this application are true, correct and complete. By making this application the receiver agrees that the tomatoes obtained herein will not be resold or transferred for resale, directly or indirectly, but will be used only for the purpose(s) specified above. The receiver further agrees to undergo random inspection and to submit such reports as is required by the Florida Tomato Committee.

\_\_\_\_\_  
 Date

\_\_\_\_\_  
 Name of Firm

\_\_\_\_\_  
 Telephone Number

\_\_\_\_\_  
 Signature of Applicant

**DO NOT WRITE BELOW THIS LINE**

Approved       Disapproved      Date \_\_\_\_\_

Signature of Committee Manager \_\_\_\_\_

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