

RAISIN ADMINISTRATIVE COMMITTEE  
2445 Capitol Street, Suite 200  
Fresno, California 93721  
Phone: (559) 225-0520

REQUEST FOR USDA APPEAL INSPECTION

I hereby request an appeal inspection of the raisins covered by Inspection Certificate No. \_\_\_\_\_, (Form FV-489 or Form FV-490) and Weight Certificate No. \_\_\_\_\_, in accordance with the regulations governing Inspection and Certification of Processed Fruits and Vegetables and Related Products, and paragraph 989.158(a)(5) or 989.158(h) of Marketing Order No. 989, as amended. These raisins are located at \_\_\_\_\_ (original inspection point), California.

Name of Handler	Name of Producer
By: _____	By: _____
Handler Representative	Authorizing Agent
Title _____	Title _____

Inspectors performing appeal inspection:	Worksheet No.: _____
1. _____	Variety: _____
2. _____	Box Count: _____
	Fee: _____
	Net Weight: _____

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