

IDAHO-EASTERN OREGON ONION COMMITTEE

P.O. Box 909, PARMA, ID 83660

PHONE: 208-722-5111 FAX: 208-722-6582

**CERTIFICATE OF PRIVILEGE
APPLICATION TO MAKE SPECIAL PURPOSE SHIPMENTS**

The Marketing order for onions requires that handlers desiring to make shipments outside the production area to canners, dehydrators, extractors, freezers, and/or pickers, which do not meet the requirements for fresh shipments, shall prior to making such a shipment apply to the Idaho-Eastern Oregon Onion Committee (Committee) for permission. A shipment may be made to a receiver without a COP Permit number, if the sale occurs after 5 pm, on a holiday, or weekend; provided, that both the handler and receiver have had prior approval and this Application is faxed to the Committee prior to shipment.

| | | | | | | |
|------------------------|---|--------------------------------------|--|-------------------------------------|-----------------------------------|-----------------------------------|
| Receiver & Agent | | | | | Phone | |
| Contact Person(s) | | | | | | |
| Address | | | | | | |
| City | | State | | Zip | | |
| Purpose of Shipment(s) | <input type="checkbox"/> Canning | <input type="checkbox"/> Dehydration | <input type="checkbox"/> Experimentation | <input type="checkbox"/> Extracting | <input type="checkbox"/> Freezing | <input type="checkbox"/> Pickling |
| Type of Sale | <input type="checkbox"/> Spot Sale <input type="checkbox"/> Volume Sale | | | Total cwt. | | |
| Shipment Date(s) | | | | | | |
| Container(s) | <input type="checkbox"/> 50 lb bags | <input type="checkbox"/> Totes | <input type="checkbox"/> Bins | <input type="checkbox"/> Bulk | <input type="checkbox"/> Other: | |

I, the undersigned, hereby certify to USDA and to the Committee, that I have read, fully understand, and agree to comply with 7 CFR § 958.328 which governs the handling of onions, and further agree that none of these special purpose onions will be diverted to any fresh market outlet(s). To the best of my knowledge all statements in this Application are true and complete. In addition, I will prepare an Onion Diversion Report for each Application and submit it to the Committee. The Committee reserves the right to audit the receiver or their agent randomly to verify shipments. Falsification of information on this government document may result in a fine, imprisonment, or both (18 U.S.C. 1001).

| | | | | | | |
|-----------|--|-------|------|--------|--|--|
| Signature | | | Name | | | |
| Title | | | Date | | | |
| Firm | | | | Phone: | | |
| Address | | | | | | |
| City | | State | | Zip | | |

COMMITTEE ACTION

APPROVED NOT APPROVED Reason not approved: _____

COP Permit No. _____ Date Approved: _____ Manager: _____

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 8 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.

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