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): □ P □ Experimental purposes □ Other Cor | rickling □ Processing □ Charity or Relief □ Export mmittee Approved Purpose. |
| Receiver's physical address where stated privile different from above: | vilege purpose is accomplished (i.e. pickling, processing, etc.), if |
| By making this application the receiver agrees the resale, directly or indirectly, but will be used on | entoes? Yes No ements contained in this application are true, correct and complete. that the tomatoes obtained herein will not be resold or transferred for ly for the purpose(s) specified above. The receiver further agrees to 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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