

**Section 2: Facility Name/Address Information**

Note: If you modify this address, please review the address in Section(s) 4 and 11 to verify that those addresses are still correct.

**Facility Name**

**Facility Name Suffix**

**Country/Area**

**Street Address, Line 1**

**Street Address, Line 2 (Optional)**

**Zip/Postal Code**

**Telephone Number**  
     
Country Area Phone Number Extension

**Fax Number (Optional)**  
    
Country Area Fax Number

**E-Mail Address**

**Confirm E-Mail Address**

**Unique Facility Identifier (UFI)**

Figure 1: Addition of Unique Facility Identifier (UFI) field in Section 2.

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### Food Facility Registration

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Section 1 | Section 2-4 | **Section 5-7** | Section 8-9 | Section 9a-9b | Section 10 | Section 11-12 | Review

#### Step 3: Additional Information

#### Section 5: Facility Emergency Contact Information

For foreign facilities, FDA will use your U.S. agent as your emergency contact unless you choose to designate a different contact here.

If information is the same as another section, check which section:

Same as Facility Address (Section 2)  
 Same as U.S. Agent Information (Section 7)  
 None of the above

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#### Section 6: Trade Names

(If this facility uses trade names other than that listed in Section 2 above, list them below (e.g., "Also doing business as," "Facility also known as"))

Are there alternate trade names used by your facility in addition to the name provided in Section 2: Facility Name/Address Information?  
 Yes  No

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#### Section 7: United States Agent

Do you have U.S. Agent ID from the U.S. Agent you are trying to identify?  
 Yes  No

Enter U.S. Agent ID

Figure 2: Addition of the U.S. Agent Identification number in Section 7; field appears upon user selecting 'Yes' option.