

Agricultural Clearance Order
Form ETA-790B Addendum B
U.S. Department of Labor



C. Additional Place of Employment Information

1. Name of Agricultural Business*	2. Place of Employment *	3. Additional Place of Employment Information	4. Begin Date*	5. End Date*	6. Total Workers*

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D. Additional Housing Information

1. Type of Housing *	2. Physical Location *	3. Additional Housing Information §	4. Total Units *	5. Total Occupancy *	6. Applicable Housing Standards *
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