**APPLICATION FOR PRUNE PLUM DIVERSION**

**INDEPENDENT PRODUCER**

To: PRUNE MARKETING COMMITTEE 1. Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

3840 Rosin Court, Suite 170

Sacramento, CA 95834

The undersigned hereby certifies that all information contained in this application is true and correct to his best knowledge and belief and that he held proprietary interest in the prune plums for diversion as of July 1, 20\_\_.

|  |  |
| --- | --- |
| **FOR PMC USE ONLY** | |
| A. Producer  Number |  |
| B. Application  Approved |  |
| C. Field  Office |  |
| Telephone  Number |  |

2. Name of Producer: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

3. Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

4. Producer Status *(check one)*: (1) Owner Operator □

(2) Share Landlord □

(3) Share Tenant □

(4) Cash Tenant □

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **DIVERSION** | | | | |
| 5. Maximum Green Tons Applied for | | HARVESTED | UNHARVESTED | TOTAL |
|  |  |  |
| 6. County(ies) of Production | |  |  |  |
| 7. Variety(ies) of Prune Plums | |  |  |  |
| 8. Location of  Diversion | Dump Location | | Orchard Location | |
|  | |  |  |
|  | |  |  |
|  | |  |  |
|  | |  |  |
| 9. Diversion Deposit:    If Line 5 Total is 28.5 Green Tons or less the minimum deposit is $100  OR  If Line 5 Total is greater than 28.5 Green Tons: (\_\_\_\_\_) x $3.50……………………………… | | | | $ |

|  |  |
| --- | --- |
| FOR PMC USE ONLY DEPOSIT | |
| D. Amount  Received |  |
| E. Check  Number |  |
| F. Date  Received |  |
| G. Bank  Number |  |
| H. Account  Number |  |
| I. Signatory\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |

10. Orchard Operator’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(IF DIFFERENT THAN LINE 2)

11. Applicant’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(PLEASE PRINT)

12. Applicant’s Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

13. Applicant’s Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

14. Telephone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(AREA CODE AND NUMBER)

15. Mail to the Prune Marketing Committee (Committee) at the address above.

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 10 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.

**INSTRUCTIONS - INDEPENDENT PRODUCER**

A. Study the example before filling out your application on the reserve side of this sheet.

B. Do not write anything in the block marked “For PMC Use Only.”

C. Be sure the application is otherwise 'completed in full to avoid rejection.

D. If you are a dehydrator or green fruit buyer acting as a diversion agent for one or more producers, please contact the Committee/Sacramento for special instructions in filling out your application (s).

E. The following instructions are numbered to correspond to the line numbers on the application.

1. Fill in the data on which the application is filled out.
2. The producer’s name on line 2 should be the same as the applicant on line 11, UNLESS the producer is a partnership or a corporation, or is doing business as an entity not in the name of the applicant. If the name is not the same as that shown on line 2, applicant should enter on line 11, after his name, his position (partner, manager, executor, president, owner, or other title best describing authority to make application).
3. Address of 2.
4. On line 4, check the box that applies to the status of the producer named on line 2. For example, if the name on line 2 is the Share Landlord, check box no. 2 on line 4, and if you as the applicant are the Share Tenant on the property, enter “Share Tenant” on line 11 after your name.
5. On line 5, enter in each box the green tons you intend to divert (not dried equivalent). If you intend to divert only HARVESTED (Dipper), enter the green tons applied for in the “Harvested” box, enter NONE in the “Unharvested” box, and repeat the figure entered in the “Harvested” box in the “TOTAL” box. If you intend to divert both harvested and unharvested, enter in the appropriate box the green tons to be diverted by each method, and show the total in the “TOTAL” box.
6. The county(ies) in which the prune plums for diversion were actually produced.
7. The variety(ies) of prune plums to be diverted. If interplant’s, enter the predominant varieties and the percentage of each variety.
8. The physical location where diversion will take place. Provide sufficient instructions to allow Committee representatives to locate the diversion location.
9. The amount on line 9 will be at least $100. If you are applying for more than 28.5 tons multiply the total tons applied for by $3.50, and enter this amount on line 9.
10. Print the title and name of the person to be contacted at the diversion location if not applicant.
11. See No. 4 above.
12. Mailing address to which applicant wants diversion information sent if different from line 3 above.
13. Signature of person qualified to authorize diversion.
14. Telephone number at which you can be reached to answer a question on your diversion during the day. If you are there during certain hours of the day so indicate, for example (916) 123-4567 (12:00 -1:00 p.m.).
15. Mail application to this address. If you have questions on the information required on the balance of the application form, call (916) 565-6235, or write to the address shown on line 15 of the application.

IMPORTANT NOTICE: The issuance of a false certificate knowing it to be false is a violation of title 18, section 1001 of the United States Code, which provides a penalty of a fine or imprisonment, or both.

AUTHORITY: § 993.62 of Marketing Order No. 993, as amended, and § 993. 162(c) of the Administrative Rules and Regulations established pursuant thereto.

In accordance with Federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, the USDA, its Agencies, offices, and employees, and institutions participating in or administering USDA programs are prohibited from discriminating based on race, color, national origin, religion, sex, gender identity (including gender expression), sexual orientation, disability, age, marital status, family/parental status, income derived from a public assistance program, political beliefs, or reprisal or retaliation for prior civil rights activity, in any program or activity conducted or funded by USDA (not all bases apply to all programs). Remedies and complaint filing deadlines vary by program or incident.

Persons with disabilities who require alternative means of communication for program information (e.g., Braille, large print, audiotape, American Sign Language, etc.) should contact the responsible Agency or USDA’s TARGET Center at (202) 720-2600 (voice and TTY) or contact USDA through the Federal Relay Service at (800) 877-8339. Additionally, program information may be made available in languages other than English.

To file a program discrimination complaint, complete the USDA Program Discrimination Complaint Form, AD-3027, found online at http://www.ascr.usda.gov/complaint\_filing\_cust.html and at any USDA office or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call (866) 632-9992. Submit your completed form or letter to USDA by: (1) mail: U.S. Department of Agriculture Office of the Assistant Secretary for Civil Rights 1400 Independence Avenue, SW Washington, D.C. 20250-9410; (2) fax: (202) 690-7442; or (3) email: [program.intake@usda.gov](mailto:program.intake@usda.gov). USDA is an equal opportunity provider, employer, and lender.