**FAR WEST SPEARMINT OIL ADMINISTRATIVE COMMITTEE**

**6601 W. Deschutes Ave., Suite C-2**

**Kennewick, WA 99336**

**Phone: (509) 585-5460 or Fax: (509) 585-2671**

**Grower No.: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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| **APPLICATION FOR CLASS 3 (NATIVE) ANNUAL ALLOTMENT**  **I request that an Annual Allotment Certificate be issued in the name of**  **for the 20\_\_\_ - 20\_\_\_ marketing year for CLASS 3 Spearmint Oil.** |

Please: 1) Line through fields you have taken out.

2) Add NEW fields and descriptions below.

3) Indicate how many years, including this year, each field has been in production.

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| **New Acres** | **Old Acres** | **Years in Production** | **Location Description** |
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| **Total New** | **Total Old** |
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Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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