

All FLCA's indicate a required field.

TYPE OF APPLICATION FOR CERTIFICATE OF REGISTRATION

Application Year:

Permit/certificate number (if applicable):

Certificate Number:

FIREFIGHTERS

Does this applicant own or hold any firefighting activities?

If yes, specify the firefighting activities:

THE APPLICANT IS A/AN

Individual (with or without "Doing Business As" (DBA) name)
 Partnership
 Corporation
 Partnership
 Limited Liability Company (LLC)
 Other

INDIVIDUAL OR PROPRIETORSHIP

First Name* Middle Name Last Name*
Social Security Number Date of Birth (mm/dd/yyyy)
DBA Name (if applicable) DBA EIN (if applicable)
Phone Number Email Address

ADDRESS

Appl. or Applicant Representative's permanent place of residence (this may not be a P.O. Box)
Address*
City* State* Zip Code* Country*
Mailing or business address, if different from address above
Address
City State Zip Code Country
What address should appear on this certificate?
 Permanent place of residence Mailing/business address

FARM LABOR CONTRACTING ACTIVITIES TO BE PERFORMED

Check each activity to be performed involving migrant and/or seasonal agricultural workers for agricultural employment under this certificate.
 Harvest Hire Packer Transport Select Employ
Location of work with as much specificity as possible, including state, city, and farm name(s) if known:

CRIMINAL HISTORY

Has the applicant or, in the case of a company, the applicant's representative, been convicted within the past 5 years, under state or Federal law, of any of the following crimes?
A. Any crime relating to gambling, or to the sale, distribution or possession of alcoholic beverages, in connection with or incident to the business contracting activities?

B. Any felony involving robbery, bribery, extortion, embezzlement, grand larceny, burglary, arson, violation of narcotics laws, murder, rape, sexual assault, child abuse, child abuse/neglect, physical battery, injury, intimidation, perjury, or smuggling or harboring individuals who have entered the United States illegally?

Please attach a copy of the final judgement

Your judgement:

A properly completed Form FD-258 fingerprint card must be submitted to WHD at least once every three years. Have you submitted a fingerprint card (FD-258) within the last three years?

DOES THE APPLICANT REQUIRE TRANSPORTATION AUTHORIZATION?

Will the applicant be transporting workers in vehicles that it owns or controls?

APPLICATION FOR TRANSPORTATION AUTHORIZATION

Submit proof of compliance with the motor vehicle safety and insurance requirements for each vehicle that you own or control to transport migrant or seasonal agricultural workers. This proof must be a completed Form WH-514, WH-514a or other substantially similar report.
Proof of compliance for motor vehicle safety and insurance

 Vehicle liability insurance coverage in the amount of not less than \$100,000 for each seat in the vehicle.
 Liability bond
 State worker compensation insurance coverage and a minimum of \$50,000 per accident in motor carrier or other appropriate insurance.

In what state(s) will the applicant be transporting workers?

State:
Circumstances in which the applicant will transport workers:
 Daily transportation between living quarters and worksite
 Regular transportation to and from work
 Long distance travel between work sites or between the worker's permanent residence
 Other (specify):

Will there be times that the applicant will transport workers in vehicles that it does not own or control?
If so, please describe the circumstances in which you will transport workers, and that the worker's compensation policy covers these circumstances under applicable state law. Further, please state will not transport workers at any circumstances not covered under applicable state law by the worker's compensation policy.

DOES THE APPLICANT REQUIRE DRIVING AUTHORIZATION?

Will the applicant be operating a motor vehicle?

APPLICATION FOR DRIVING AUTHORIZATION

Only complete if the applicant is an individual (with or without a DBA name) or proprietorship.
In what state(s) will the applicant be driving workers?

Applicant's current license (state):

Applicant's driver's license (state):

Applicant's driver's license number (state):

Select "Not Applicable" if the applicant already has a currently valid driver's license on file with WHD.

DOES THE APPLICANT REQUIRE HOUSING AUTHORIZATION?

Will the applicant own or control any facility or real property that will be used for housing by migrant agricultural workers in the applicant's control at any time?

APPLICATION FOR HOUSING AUTHORIZATION

Check the applicable box below and attach the corresponding document indicating that the housing that is owned or controlled by the applicant and that will be used to house migrant agricultural workers meets all applicable housing and public utility and health standards. Such proof must be submitted for each facility or real property and must identify the benefits housing is authorized.
 I/We have WH-520 Housing Occupancy Certificate issued by a state or local health authority or other appropriate agency.
 Occupancy certificate or permit issued by a state or local government agency.
 A signed and dated written request for the inspection of a facility or real property made to the appropriate state or local agency at least forty-five (45) days prior to the date on which it is to be occupied by migrant agricultural workers.
Read and agree to the statement below
I/We intend to comply with HOUSING REQUIREMENTS OF THE MIGRANT AND SEASONAL AGRICULTURAL WORKER PROTECTION ACT (MSPA).
Section 10521 of the MSPA requires that an applicant for a certificate of registration with authorization to house migrant agricultural workers shall be a licensed developer, each facility or real property to be used by the applicant to house any migrant agricultural worker during the period for which registration is sought. 29 U.S.C. 11812(a)(2)(C), 18 USC 2102, 19 USC 1504(a)(2). The facility or real property to be used shall be inspected by the applicant upon request and the applicant shall provide documentation showing that the applicant is in compliance with all applicable federal and state laws and health standards with respect to each such facility or real property and that the applicant has decided that such housing will not be used to house migrant agricultural workers in any facility or real property (state or control) if local, state, or federal government agencies have been issued a Certificate of Registration with housing authorization. I understand that I may then house migrant agricultural workers only on facilities or real property that have been authorized by the Secretary of Labor.

CERTIFICATIONS AND AUTHORIZATIONS

All applicants must read and agree to all certifications and authorizations in this section.
Certification of Truthfulness in Application
I certify that the information in this application is true and correct to the best of my knowledge and belief.

Statement of Intent to Comply with Transportation Requirements of the Migrant and Seasonal Agricultural Worker Protection Act (MSPA)
After filing an application to be used as proof to provide transportation to migrant and/or seasonal agricultural workers, I/We certify that I/We will use any vehicle for providing transportation to migrant and/or seasonal agricultural workers in compliance with all applicable federal and state laws and health standards with respect to each such facility or real property and that the applicant has decided that such housing will not be used to house migrant agricultural workers in any facility or real property (state or control) if local, state, or federal government agencies have been issued a Certificate of Registration with housing authorization. I understand that I may then house migrant agricultural workers only on facilities or real property that have been authorized by the Secretary of Labor.

Authorization of the Secretary to Accept Legal Process
The following authorization is required pursuant to Section 10521 of the MSPA, 29 U.S.C. 11812(a)(2)(C), 19 USC 1504(a)(2). I, the hereby authorize and agree that the Secretary of Labor may, in the event of an emergency, accept service of summons or any other action against me or any of my employees or other persons who have departed from the jurisdiction in which such action is commenced or otherwise has become unavailable to accept service and other such terms and conditions as are set forth in the court order, with or without my consent.