U.S. Department of Agriculture
Agricultural Marketing Service
Fair Trade Practices Program
Packers and Stockyards Division

APPLICATION FOR REGISTRATION
PACKER BUYER
Buying only for Slaughter as an Employee of a Meat Packer
(Under the Packers and Stockyards Act, 1921, as Amended and Supplemented)

1. Name of Applicant to Be Registered (Individual or Firm)

2a. Mailing Address

2b. City | 2c. County | 2d. State | 2e. Zip+4

3a. Operating Address (If different from mailing address listed above)

3b. City | 3c. County | 3d. State | 3e. Zip+4

4. Telephone | 5. Cell Phone | 6. Fax

7. E-Mail Address

8. Type of Livestock To Be Purchased for Slaughter (Check all that Apply)

☐ Steers and Heifer ☐ Swine

☐ Cows and Bulls ☐ Sheep and Goats

☐ Calves ☐ Horses and Mules

9. Names and Locations of Posted Stockyards, Feedlots, or Web Sites where you will purchase livestock

10. If you operate a buying station for your employer, list name, city, state and zip +4

11. If previously registered list all registered name(s) and address(es)

12. Do you own an interest in other dealer organization(s), market agency(s), stockyard company(s), or packing company(s)? If yes, complete the table below. If not, go to item no. 13 in the form.

☐ Yes ☐ No

12a. Name of other Organization	12b. Location (City, State, Zip+4 Code)	12c. % Control by Applicant

CERTIFICATION: ***With my signature, I certify the information provided on this form is true and correct to the best of my knowledge and belief I am an owner, officer, or have been authorized by responsible management to certify this report.***

13a. Signature of Applicant: | 13b. Print name of Applicant: | 13c. Date:

PACKER EMPLOYER

CERTIFICATION: The above applicant is employed by our firm to buy the livestock identified on line 8 for slaughter purposes only.

14a. Signature of Employer: | 14b. Print name: | 14c. Date:

15. Official Title:

16. Name of Firm:

17. Address: | 18. Telephone:

19. Email Address: | 20. Website, if applicable:

Do Not Complete: Completed by Packers & Stockyards Division

Registration No.

Date of Acceptance

Remarks:

Registration is required in order to operate as a market agency or dealer subject to the Packers and Stockyards Act, 1921, as amended and supplemented, and 9 CFR 201.10 (a). Information held confidential (9 CFR 201.96)

Instructions to Complete
Application for Registration
Packer Buyer
Form PSD 1100

Applicants employed by a packer on salary or other compensation and buying livestock for such packer use form PSD 1100 to register as a packer buyer. If any information is missing or incorrect, the Packers and Stockyards Division (PSD) will return the application form to the principal for completion or correction.

Operating without proper registration and bond may subject the principal to severe civil penalties as authorized by law for each violation, and additional penalties for each day the violation continues (7 U.S.C § 203).

Submit the completed form to the PSD regional office where the PACKER is bonded. The Areas covered by each regional office are listed below the regional office's address.

Regional Offices of the Packers and Stockyards Division Agricultural Marketing Service, Fair Trade Practices Program		
Eastern Regional Office 75 Ted Turner Drive SW, Ste 230 Atlanta, GA 30303-3308 Telephone: (404) 562-5840 FAX: (404) 562-5848 e-mail: PSDAtlantaGA@ams.usda.gov	**Midwestern Regional Office** 210 Walnut Street, Room 317 Des Moines, IA 50309-2110 Telephone: (515) 323-2579 FAX: (515) 323-2590 E-mail: PSDDesMoinesIA@ams.usda.gov	**Western Regional Office** 3950 Lewiston St., Suite 200 Aurora, CO 80011-1556 Telephone: (303) 375-4240 FAX: (303) 371-4609 E-mail: PSDDenverCO@ams.usda.gov
Areas Covered	**Areas Covered**	**Areas Covered**
AL, AR, CT, DC, DE, FL, GA, LA, MA, MD, ME, MS, NC, NH, NJ, NL, NY, PA, PR, QC, RI, SC, TN, VA, VT, WV	IA, IL, IN, KY, MB, MI, MN, MO, ND, NE, OH, ON, SD, WI	AB, AK, AZ, BC, CA, CO, HI, ID, KS, MT, NM, NV, OK, OR, SI, SK, TX, UT, WA, WY

If you have any questions about the form or completing the form, please contact the PSD Regional Office that covers your area, as listed above.

Packer-buyer must complete Lines No. 1 through 12 and sign and complete Line No. 13.

The Packer must complete Line 14 through 20.

	Subject	**Instruction**
1	Name of Applicant to be Registered	Enter the name of the individual to be registered.
2a through 2e	Mailing Address	Enter your mailing address, including street, city, county, state, and zip+4. This is the address where all correspondence from the Packers and Stockyards Division will be sent.

	Subject	Instruction
3a through 3e	Operating Address (if different from	Enter the operating address and/or physical location. Enter street, city, county, state, and zip+4. This is the address where you conduct your business services.
4	Phone	Enter the phone number where you can be reached.
5	Cell	Enter your cellphone number.
6	Fax	Enter your fax number.
7	E-Mail Address	Enter your e-mail address.
8	Livestock to be Purchased for Slaughter	Check the appropriate box to indicate each class of livestock you will be purchasing for slaughter.
9	Names and locations of posted stockyards, feedlots, or websites…	Enter the name and address, including city and state, of each of the posted stockyards, feedlots, or web sites where you will purchase livestock for slaughter.
10	If you operate a buying station…	Enter the name and address, including city, state, and zip+4 where you operate a buying station.
11	If previously registered, list registered name and address.	If you were previously registered with the Packers and Stockyards Division list each of the name(s) under which you were previously registered, and the address(es) of the prior business(s).
12	Do you own an interest in other operations….	If you currently operate as, or own any interest in, any dealer organization(s), market agency(s), stockyard company(s), or packing company(s), check "Yes" and provide details in the next section, otherwise, check "No."
12a through 12c	Name, Location, Percentage of Control	Enter the name(s), location, including city, state, and zip+4, and the percentage of control or ownership that you maintain in any of the businesses.
13a through 13c	Signature of Applicant, Print Name, and Date	The applicant **must** sign the application and print the name of the person signing. Enter the date the form was signed.
THIS SECTION IS TO BE COMPLETED BY THE PACKER-EMPLOYER.		
14a through 14c	Signature of Employer, Print Officer's name, Date	An authorized officer of the packer-employer must sign the form, print their name, and enter the date the form was signed.
15	Official title	Enter the official title of the officer signing the application.
16	Name of Firm	Enter the full name of the employing packer firm.
17	Address	Enter the address, including city, state and zip+4 of the packer firm.
18	Telephone	Enter the telephone number of the packer firm.
19	Email Address	Enter the email address of the packer firm.
20	Website Address, if applicable	Enter the website address of the packer firm, if applicable.