PRODUCTION BASE AND POOL QUOTA TRANSFER APPLICATION (Please print or type)				
SELLER'S NAME:				
MAILING ADDRESS:				
BUYER'S NAME:	CERTIFICATE NO			
MAILING ADDRESS:				
EFFECTIVE DATE OF TRANSFER:				
INDIVIDUAL TO CONTACT IF ANY QUESTIONS ON APPLICA	TION:			
NAMET	ELEPHONE NO			
COMPLETE THE FOLLOWING <u>ONLY</u> IF NOTIFICATION OF T PARTY, SUCH AS A BROKER OR ESCROW AGENT:	RANSFER APPROVAL SHOULD BE MAILED TO A THIRD			
NAME:				
ADDRESS:				
NAME:				
ADDRESS:				

ALL TRANSFERS OF PRODUCTION BASE AND POOL QUOTA ARE SUBJECT TO THE PROVISIONS CONTAINED IN ARTICLE 5 OF THE MILK POOLING PLAN

Section 503 of the Milk Pooling Plan provides for public disclosure of all transfers of production base and pool quota.

Applications must be received by the department on or before the 15th of the month prior to the effective date of transfer. The effective date is always the first of each month. Applications should be typed or printed legibly and submitted in duplicate.

The terms and conditions of the transfer must be fully disclosed and each item in the application must be completed.

If additional space is needed for any answer, use a separate sheet, cite the applicable item number, and attach it to this application.

Section I is to be completed by the producer(s) buying or acquiring production base and pool quota. All individuals acquiring an ownership interest must be listed in Item No. 9 and must sign the certification in Item No. 12.

Section II is to be completed by the producer(s) selling or transferring production base and pool quota. All individuals having an ownership interest in the business being transferred must sign the certification in Item No. 23.

After an application has been submitted to the Department, it may be revoked by either the transferee or transferor or his authorized agent, provided that the revocation is submitted in writing prior to the effective date of such transfer.

RETURN COMPLETED TRANSFER APPLICATION TO:

DEPARTMENT OF FOOD AND AGRICULTURE DIVISION OF MARKETING SERVICES 1220 N STREET SACRAMENTO, CA 95814

nsferor Pool Cert #	to Transferee Pool Cert #	Effective:
TO BE COMPLETED	SECTION I D BY PRODUCER(S) ACQUIRING PRODU	Pag ICTION BASE AND POOL QUOTA
This transfer is requested to be	e effective on the 1st of	,
Effective with the date of this t	ransfer, your dairy herd location will be:	
Does the above business pres	sently operate with a production base and po	ool quota? 🛛 Yes 🗌 No
If yes, give Certificate No.:		
Mailing address:		
Telephone Number:		
Name of Cooperative, if you ar	re a member:	
Type of Operation: (Check On	e) p 🔲 Corporation 🔲 Other	
Corporate or DBA name (Trade	e Name), if any:	
this application. If a partnershi		ership interest in the dairy business covered by tion, list all stockholders. Enter percentage of .
Transferee	Spouse	%
Transferee	Spouse	%
	Spouse	
Transferee	Spouse	%
	Item 9 have an ownership interest in anothe e_{e} ? \Box Yes \Box N o If yes, complete the fo	er market milk dairy operating with a production following:
Name:		Certificate No
Ranch Address:		
Has any individual named in It	em 9 <u>sold</u> production base and pool quota d	during the previous 24-month period?
Yes No If yes, comp	lete the following:	
Name of Seller:		Certificate No
transfer have been fully disclose have signed this application. If by a market milk permit effective SIGNATURE(S) OF ALL INDIV	sed and that all individuals acquiring an own It is further certified that the milk produced a ve with the date of this transfer. <u>VIDUALS ACQUIRING PRODUCTION BAS</u> spouse if proprietorship, by all partnership n	
Transferee	Spouse	
Corporation Officer		

Transferor Pool Cert # ______ to Transferee Pool Cert # ______ Effective: ______

	TO BE COMPLETED BY PROD	SECTION II DUCER(S) TRANSFERRING PR	ODUCTION BASE AND POOL QUOTA	Page 3		
13.	This transaction represents% of the transferable production base and pool quota allocation regist			egistered		
	under Certificate No (Ex			C C		
14.	In terms of pool quota SNF , the above percentage represents pounds. (Express pounds to the nearest hundredth.)					
15.	. Is this a transfer to a member of your immediate family? Yes No If yes, give relationship					
16.	VALUE OF TRANSFER:					
	Real Estate(No. of Acres)	\$	FOR DEPARTMENT USE			
	(No. of Acres) Equipment	\$				
	Number of Milking Cows		RATIO			
	Production Base and Pool Quota		BP			
	Other:					
			SP			
	Total					
17						
	Mailing Address:					
	Telephone Number: () Name and address of cooperative association, if a member, or plant that received milk from this business:					
21.	the previous 24-month period?	s No If yes, complete the f	urchased production base and pool quota of ollowing:Certificate No	-		
22.	If you are transferring 100% of your transferable entitlement, will you remain in business as a market milk producer?					
23.		urther certified that all individuals	nd correct and that the terms and conditio having an ownership interest in this dairy p			
	SIGNATURE(S) OF ALL INDIVIDUALS	STRANSFERRING PRODUCTI	<u>ON BASE AND POOL QUOTA:</u>			
	(Must be signed by owner and spouse corporation officer if a corporation.)	if proprietorship; by all partne	rship members and spouses if a partners	hip; by a		
	Transferor	Spouse				
	Transferor	Spouse				
	Transferor	Spouse				
	Transferor	Spouse				
	Corporation Officer					
	(Attach copy of Mir	nutes or Resolution authorizing to	ransfer)			