



EGG HANDLER AND PRODUCER REGISTRATION FORM

517-004a (Rev. 12/21)

*Please see instructions page for additional details

DEPARTMENTAL USE ONLY

Handler Code Initials

CA-	
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Billing Type: Monthly | Annual | Exempt

Section 1: Applicant Information

Company & Farm Name*:		Business Phone:	
Premise Address: Street	City:	State:	Zip:
Mailing Address: Street (If different from above)	City:	State:	Zip:
Contact Person: (First and Last)	Contact Phone:	Contact E-mail:	

Section 2: Business Information

Business Type: (Check Applicable Boxes)

<input type="checkbox"/> Producer ONLY	<input type="checkbox"/> Packer ONLY	<input type="checkbox"/> Producer/Packer	<input type="checkbox"/> Distributor/Wholesale
<input type="checkbox"/> Broker	<input type="checkbox"/> Breaker	<input type="checkbox"/> Hatchery	Other:

Business Entity: Individual Partnership Corporation LLC LLP

Primary Responsible Party*	Title	Address	Phone Number	Email

Section 3: Flock/Egg Information on this Premise

Egg Product Type(s): (Check Applicable Boxes) Shell Eggs Liquid Eggs Dry Eggs

Flock Information on this premise*:

Species of Fowl:	Chicken	Duck	Quail	Other
Number of Laying Birds				
Approx. Cases of Shell Eggs Graded/Produced/Handled Monthly for CA consumption: (1 Case = 30 Dozen Shell Eggs)				
Approx. Cases of Liquid Egg Products Processed/Handled Monthly for CA consumption: (1 Case = 40 lb Liquid Eggs)				
Approx. Cases of Dry Egg Products Processed/Handled Monthly for CA consumption: (1 Case = 9 lb Dry Eggs)				

USDA Grading Program? (<https://www.ams.usda.gov/publications/qa-shell-eggs>) Special Requirement Eggs: (i.e. Pasture Raised, Free Range, Cage Free, etc.)

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Section 4: Mill Fee Responsibility

Do you sell ALL your eggs to consumer on your premises? <input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Not Applicable	Do you purchase eggs/products from in-state producers? <input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Not Applicable
Do you sell eggs/products to retailers or distributors/brokers? <input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Not Applicable	Do you import eggs/products into the State of California? <input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Not Applicable
If you plan to sell at Certified Farmer Markets, <u>list all counties</u>: 	

*If another egg handler is paying the mill fee for you, **please submit with your application, a letterhead proof from each payer.** Fill out the name of business, handler code (if known), and approximate number of cases each company is paying for monthly (use additional paper if needed)*

Handler Code	Name and Address	Approx. Cases

If you are paying for someone's mill fee, provide the name of business, handler code (if known), and approximate number of cases you will be paying for monthly (use additional paper if needed)

Handler Code	Name and Address	Approx. Cases

Section 5: California Designee Information (applies to Out-of-State Registrants only)

Designee Name & Company:			
Designee Address:	City:	State:	Zip:
Designee Phone Number:	E-mail Address:		

Registration Fees:

Required Fee:	
Registration Renewal Fee	\$75
Optional Fee:	
Inspection Manual	\$15
Total Fees:	\$

Complete and make remittance payable to:

Egg Safety and Quality Management

CASHIER, CDFA

P.O. Box 942872

Sacramento, CA 94271

***Check or money orders ONLY**

All Registrations expire at the end of the calendar year regardless of when payment was received.

* The application must be signed by an owner, a member of the partnership, or an officer of the corporation under penalty of perjury and submitted with an original signature. By signing this registration form, you declare that you understand all laws and regulations relating to the preparation for market and marketing of shell eggs and/or egg products in the State of California and that all information is complete, accurate, and truthful.

Signature:	Print Name:	Date:
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