

Your Egg Handler's Registration will expire on December 31, 2024.

Please complete all questions, sign, date, and return the application in the enclosed envelope with a check amount of \$50.00 made payable to the "CDFA – 410." Please indicate any changes that have occurred since the license was issued to you.

Please note, the envelope must be postmarked on or before December 31, 2024. **If the envelope is postmarked after the deadline, your registration will be discontinued and you will need to apply for a new registration, along with a new registration fee of \$75.00, to the Department in order to conduct business within the State.**

If you no longer handle shell eggs or egg products and would not like to renew your registration, please complete Section 1 & 6 of the enclosed form.

If you have any questions, please contact Raeanne Redmond or Lily Yura at (916) 900-5062.

Sincerely,



Michael E. Abbott, Egg Quality Manager

EGG HANDLER AND PRODUCER REGISTRATION FORM INSTRUCTION/ INFORMATION SHEET

Please read the following information and instructions prior to completing the application for an egg handler registration. We request that you either **type or print clearly in ink** to avoid any delay in the issuance of the registration for which you are applying. **Incomplete applications will not be issued a license.**

Section 1: Applicant Information

Company & Farm Name

If you are applying as an individual/sole proprietorship, please enter your first and last name. If you are a partnership, please enter the name of the partnership as you wish it to appear on the license. Corporations need to identify themselves as they are registered with the California Secretary of State or the incorporating state if not a California based company.

Premises Address

This is the physical location where you conduct business. If you have more than one office, provide the address of the principal office location. If you conduct business from your residence, please list your complete home address, including zip code. For P.O. Box, use mailing address.

Mailing Address

This is the address where official business documents and information can be sent. If your mailing address changes at any time, you should notify the Egg Safety and Quality Management Program so we can update our records.

Contact Information

Please provide the best contact person, phone and e-mail address for communication or documents.

Section 2: Business Information

Business Type

Check the appropriate box which identifies the type/s of business that you will be conducting. You may check all that is applicable.

Producer ONLY – a person engaged in the business of producing eggs from domesticated fowl for human consumption. This business type includes farm only, no processing plant.

Packer ONLY – a person engaged in processing and/or packing eggs/products for sale. Processing plants only, no farm/birds.

Producer/Packer – a person engaged in the business of producing and packing eggs/products for sale. Includes both farm and a processing plant.

Distributor/Wholesale – warehouse distribution center that sells eggs from a warehouse or physical site.

Broker – a person who buys and sells eggs/products for others.

Breaker – egg breaking plant that processes shell eggs into liquid egg product.

Hatchery – a facility where eggs are hatched to produce chicks.

Export out of U.S. ONLY - a person engaged in the business or producing and/or packing eggs/products for sale outside of the United States.

CONTINUED on reverse side

Business Entity & Most Responsible Person(s)

Check the type of business organization and list any owners, members of partnership, or officers of corporation. This section must have information for owner or CEO at a minimum.

Section 3: Flock/Egg Information

Egg Product Type(s)

Check the appropriate box which identifies the type of egg product you will be producing or selling. You may check all that is applicable.

Flock Information on this Premise

Provide the approximate amount of laying flock and cases produced/handled monthly for each species of fowl.

USDA Grading Program

Provide the P-number if you are part of the USDA grading program. For more information, please visit:

<https://www.ams.usda.gov/publications/ga-shell-eggs>

Special Requirement Eggs

Special Requirement Eggs Definition – Eggs which are labeled as containing a distinguishing quality or condition.

Examples: Higher omega, pasture raised, free range, balut, etc.

Section 4: Mill Fee Responsibility

Do you sell ALL your eggs to consumer on your premises?

Answer yes only if all the eggs are sold on the premises. If you sell at a farmers market, answer no.

Do you purchase eggs/products from in-state producers?

This question applies to California producer/packer only.

Do you sell eggs/products to retailers or distributors/brokers?

This question applies to California producer/packer only.

Do you import eggs/products into the State of California?

This question applies to California producer/packer only.

Do you sell or plan to sell at California Certified Farmers Markets?

If you are selling at a farmers market, please list the county where you will be selling your eggs. If you sell in more than one county, please list all. Each location must have a valid registration copy, contact Egg Safety and Quality Management for additional copies of your egg handler registration.

Egg Mill Fee Payee: If another egg handler is paying the mill fee on your behalf, please provide a letter from that egg handler on an official letterhead and signed by a company official, stating that they are paying the mill fee on your behalf. Mill fees currently only apply to chicken eggs.

Egg Mill Fee Payor: If you are paying the mill fee for any registered entity, please list the entity's handler code, name and address, and the approximate cases you are paying per month.

Section 5: California Designee

Before receiving a registration as required by this chapter, an applicant whose home office or principal place of business is outside of California shall designate an agent in California who is authorized to receive service of process in actions by the state or the Department.

Registration Fee:

A new application has a fee of \$75. Renewing application has a fee of \$50. The Shell Egg Inspection Manual is an optional document that can be purchased for \$15. This manual cover type of inspections, definition of eggs and egg defects, inspection procedures, labeling requirements, refrigeration requirements, and current laws and regulations references. All registrations expire at the end of the calendar year (December 31) regardless of when payment was received for the application. **However, if registering after November, the program will allow the registration to carry over to the following year.** Please only submit check or money orders.

Signature

Application must be signed and dated by an owner, a member of the partnership, or an officer of the corporation to be valid. It may take several weeks to process applications, so please submit applications by December 1st for timely processing. For any additional clarification or assistance, please contact the Egg Safety and Quality Management Program.

Program Contact:

Phone: (916) 900-5062

Email: CDFA.ESQM_inquiries@cdfa.ca.gov

Webpage: <https://www.cdfa.ca.gov/ahfss/mpes/esqm.html>



EGG HANDLER AND PRODUCER REGISTRATION RENEWAL FORM

517-004b (Rev. 06/24)

DEPARTMENTAL USE ONLY

Handler Code: Initials

CA-

*Please see attached instruction/information page for more details .

INCOMPLETE APPLICATIONS WILL NOT BE PROCESSED

Section 1: Applicant Information

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

Section 2: Business Information

Business Entity: Individual Partnership Corporation LLC LLP

Most Responsible Person(s)	Title	Address	Phone Number	Email

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	<input type="checkbox"/> Export out of U.S. ONLY

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, 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 California Certified Farmers 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 your own and/or 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 Individual's Name & Company:			
Designee Address:	City:	State:	Zip:
Designee Phone Number:	E-mail Address:		

Section 6: Registration Cancellation

If you need to cancel your registration, please give us a call stating the reason, or provide a brief cancellation note with this form. Sign, date, and return this form with the enclosed envelope.

Registration Fees:

Required Fee:	
Registration Renewal Fee	\$50
Total Fees:	\$

Make remittance payable to: **CDFA – 410**

Mail this application and payment to:
 CA Department of Food and Agriculture, MPES
 P.O. Box 942881
 Sacramento, CA 94271

All Registrations expire at the end of the calendar year regardless of when payment was received. Payments postmarked after December 31 will be considered a new registration and \$75 will be due.

** 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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