

CALIFORNIA DEPARTMENT OF FOOD AND AGRICULTURE  
EGG SAFETY AND QUALITY MANAGEMENT PROGRAM

## REGISTRATION FORM INSTRUCTION/INFORMATION SHEET FOR EGG HANDLERS

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** in order to avoid any delay in the issuance of the registration for which you are applying. All applications for registration must be complete and include all required attachments. **INCOMPLETE APPLICATIONS WILL NOT BE PROCESSED.**

### APPLICATION FOR REGISTRATION:

**FAC Section 27541.** Any person engaged in business in this state as an egg handler, or any out-of-state egg handler selling eggs into California, shall register with the secretary. A new registration shall be submitted if any current information changes.\*

**FAC Section 27542.** The certificate of registration shall not be transferable to any person, or be applicable to any location other than the location for which originally issued, and shall be conspicuously displayed at such location.\*

### 1. APPLICANT INFORMATION

#### **Business Name**

Please enter the name of the company 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.

Subsidiaries are considered a separate entity from the corporation and must be licensed separately.

#### **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.

#### **Address of Flock or Business Operation**

Provide the address of your flock of birds. If you do not have a flock, provide the physical location where you conduct business. If you conduct business from your residence, please list your complete home address.

#### **Business Phone**

Enter the telephone number where you can be reached during normal business hours. Please include area code.

#### **Business Fax and Email**

Enter your fax telephone number and email address where information can be sent.

### 2. EGG HANDLER BUSINESS INFORMATION

#### **Egg Handler Business Type**

Check all applicable boxes which identify the type of business that you will be conducting.

#### **Egg Product Type**

Check the appropriate box or boxes to identify the type or types of egg product you will be selling.

### 3. FLOCK/EGG INFORMATION

#### **Species of Bird**

**FAC Section 27513.** "Eggs" means eggs in the shell from chickens, turkeys, ducks, geese, or *any other* species of fowl.\*

List all species of bird eggs handled. Use additional pages if necessary.

#### **Flock Size**

List the size of laying flock for each type of fowl handled.

#### **Cases of Shell Eggs, Liquid Eggs, and Dry Eggs**

List the volume of all eggs handled monthly, in cases. Note that one case equals 30 dozen shell eggs, 40 pounds of liquid eggs, or 9 pounds of dry eggs. Use additional pages if necessary.

### **Selling all Eggs to Consumers on Premises**

Answer yes *only if ALL* of the chicken eggs are sold on the premises, otherwise answer no.

### **Selling at Certified Farmers Markets**

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

### **Selling Organic Eggs**

*If applicable*, please provide the California Organic Registration number and USDA Certification number.

### **Special Requirement Eggs**

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

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

## **4. MILL FEE RESPONSIBILITY**

**FAC Section 27551.** The following persons shall pay to the secretary a maximum fee of fifteen cents (\$0.15) for each 30 dozen eggs sold as provided below:

- (a) California egg handlers shall pay the fee on all egg sales from their own production, on eggs purchased or acquired from California egg producers, and on eggs processed into egg products. California egg handlers shall not pay a fee on eggs purchased from out-of-state egg handlers or egg producers.
- (b) California egg producers shall pay the fee on all egg sales to anyone not registered under this chapter as an egg handler, to out-of-state purchasers, and to egg breaking plants.
- (c) Out-of-state egg handlers and producers shall report and pay the fee on egg sales into California sold to a retailer, producer, handler, or breaking plant, and on egg products brought into the state at a maximum rate of fifteen cents (\$0.15) for each equivalent of 30 dozen eggs.
- (d) Shipments of eggs that are accompanied by a United States Department of Agriculture certificate of grade and sold to the federal government or its agencies are exempt from these fees.
- (e) Eggs sold to household consumers on the premises where produced from a total flock size of 500 hens or less are exempt from these fees.
- (f) The assessment provided for in this section shall only be paid once on any particular egg.\*

If another egg handler is paying the mill fee on your behalf, please provide a letter from that egg handler, on 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.**

## **5. CALIFORNIA DESIGNEE INFORMATION (OUT-OF-STATE ONLY)**

**FAC Section 27685.** Before receiving a registration as required by this chapter, an applicant whose home office or principal place of business is outside of California shall file with the Department the name of an agent in California who is authorized to receive service of process in actions by the state or the Department in the enforcement of this chapter.\*

### **SIGNATURE**

Application **must** be signed and dated by an authorized representative to be valid.

For any additional clarification or assistance, please contact Egg Safety and Quality Management at (916) 900-5062.

\*Refer to the Food and Agricultural Code (FAC) and California Code of Regulations (CCR) for full statute and regulation texts. Links to the FAC and CCR are available at <http://www.cdfa.ca.gov/ahfss/mpes/esqm.html>.



| DEPARTMENTAL USE ONLY   |                      |
|---|----------------------|
| Handler Code  | Initials             |
| <input type="text"/>  | <input type="text"/> |
| Payment Type: Mo <input type="checkbox"/> An <input type="checkbox"/> Ex <input type="checkbox"/> |                      |

### EGG HANDLER AND PRODUCER REGISTRATION FORM

517-004a (Rev. 10/18)

| Section 1: Applicant Information  |  |
|---|--|
| <b>Business Name:</b><br><input type="text"/><br><b>Mailing Address: Street</b><br><input type="text"/><br><b>City</b> <b>State</b> <b>Zip</b><br><input type="text"/> <input type="text"/> <input type="text"/><br><b>Owner/General Manager:</b> <b>Phone:</b><br><input type="text"/> <input type="text"/><br><b>Email:</b><br><input type="text"/>   | <b>Address of Flock or Business Operation: Street</b><br><input type="text"/><br><b>City</b> <b>State</b> <b>Zip</b><br><input type="text"/> <input type="text"/> <input type="text"/><br><b>Business Phone:</b> <b>Fax:</b><br><input type="text"/> <input type="text"/><br><b>Web Page:</b><br><input type="text"/><br><b>USDA Egg Grading Program?</b><br>Yes <input type="checkbox"/> , P- _____ ; No <input type="checkbox"/> |
| Section 2: Business Information   |  |
| <b>Business Type: (Check Applicable Boxes)</b>  |  |
| <input type="checkbox"/> 1. Producer Only   | <input type="checkbox"/> 5. Broker   |
| <input type="checkbox"/> 2. Packer Only   | <input type="checkbox"/> 6. Breaker  |
| <input type="checkbox"/> 3. Producer/ Packer  | <input type="checkbox"/> 7. Hatchery   |
| <input type="checkbox"/> 4. Distributor/ Wholesale  | <input type="checkbox"/> 8. Other _____  |
| <b>Egg Product Type(s):</b> (Check all applicable boxes)      Shell Eggs <input type="checkbox"/> Liquid Eggs <input type="checkbox"/> Dry Eggs <input type="checkbox"/>  |  |
| Section 3: Flock/Egg Information (Please attach additional pages if necessary)  |  |
| <b>What species of bird eggs do you sell?</b> Chicken <input type="checkbox"/> Duck <input type="checkbox"/> Quail <input type="checkbox"/> Other <input type="checkbox"/> Please specify: _____<br><b>What is the size of laying flock?</b> Chicken _____ Duck _____ Quail _____ Other, please specify: _____<br><b>How many cases of shell eggs graded/ produced/ handled monthly?</b> (1 case = 30 dozen shell eggs)<br>Chicken _____ Duck _____ Quail _____ Other, please specify: _____<br><b>How many cases of egg products processed/handled monthly?</b> (1 case = 40 lbs. liquid, 9 lbs. dry egg product)<br>Specify species and number of cases: Liquid _____ Dry _____<br><b>Do you sell ALL of your chicken eggs to consumers on your premises?</b> ..... Yes <input type="checkbox"/> No <input type="checkbox"/><br><b>Do you sell at Certified Farmers Markets?</b> ..... Yes <input type="checkbox"/> No <input type="checkbox"/><br>If yes, list County(s), CPC number(s), and species of eggs: _____<br><b>Do you sell organic eggs?</b> ..... Yes <input type="checkbox"/> No <input type="checkbox"/><br>If yes, CA Organic Registration # _____, USDA Certification # _____<br><b>Do you produce Special Requirement Eggs?</b> ..... Yes <input type="checkbox"/> No <input type="checkbox"/><br>If yes, list type(s): _____ |  |

**Section 4: Mill Fee Responsibility** \*Refer to Food and Agricultural Code (FAC) Section 27551

- Do you purchase eggs/products from out-of-state egg handlers? .....Yes  No
- Do you purchase eggs/products from in-state producers? ..... Yes  No
- Do you sell eggs/products to retailers or distributors/ brokers? .....Yes  No
- Do you import eggs/products into the State of California? .....Yes  No
- Are you responsible for the mill fee assessment for eggs/products you handle? .....Yes  No

Is another egg handler paying the mill fee for you? Yes  No

If yes, *please submit with your application, a letterhead proof from each payer.*

Fill out the name, location, and approximate number of cases each company is paying for monthly:

| Handler Code | Name | Approx. Cases |
|--------------|------|---------------|
|              |      |               |
|              |      |               |
|              |      |               |

Are you paying for someone's mill fee? Yes  No

If yes, provide the name of business, handler code, and approximate number of cases you will be paying for monthly:

| Handler Code | Name | Approx. Cases |
|--------------|------|---------------|
|              |      |               |
|              |      |               |
|              |      |               |

**Section 5: California Designee Information (Out-of-State Registrants)** \*Refer to FAC Section 27685

Resident Agent Name: \_\_\_\_\_  
 Resident Agent Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

**Registration fees:**

| Required Fees            |                            |           |
|--------------------------|----------------------------|-----------|
| <input type="checkbox"/> | Registration Fee: \$75.00  | \$        |
| Optional Materials       |                            |           |
| <input type="checkbox"/> | Inspection Manual: \$15.00 | \$        |
| <b>Total Fees:</b>       |                            | <b>\$</b> |

**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.**

If you need further information, please contact the Department of Food and Agriculture, Egg Safety and Quality Management Program (ESQM) at (916) 900-5062, or write to 1220 N Street, Sacramento, CA 95814. Visit our internet website at <http://www.cdfa.ca.gov/ahfss/mpes/esqm.html>.

By signing this registration form, I declare that I 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