

**State of California
Milk Handler's License
Renewal Application - Distributor**

**Department of Food and Agriculture
Dairy Marketing Branch
1220 N Street
Sacramento, CA 95814
Telephone: (916) 341-5988
Fax: (916) 341-6697
Email: dairy@cdfa.ca.gov**

The undersigned hereby applies for a license pursuant to Chapter 2, Part 3, Division 21; or Chapter 1, Part 3, Division 21 of the Food and Agricultural Code.

**Two year License Fee \$25.00
FOR THE PERIOD ENDING DECEMBER 31, 2008
PENALTY FEE OF \$25.00 IF NOT POSTMARKED BY DECEMBER 31, 2006**

PLEASE PRINT OR TYPE

1. DATE BUSINESS STARTED OPERATION	TELEPHONE NUMBER ()	FAX NUMBER ()	E-MAIL ADDRESS
2. BUSINESS NAME OF APPLICANT			
3. BUSINESS LOCATION ADDRESS			ZIP CODE
4. BUSINESS MAILING ADDRESS			ZIP CODE

5. CHECK APPROPRIATE BOX

INDIVIDUAL

PARTNERSHIP

CORPORATION

6. INDIVIDUAL, MEMBER OF PARTNERSHIP, OR OFFICERS OF CORPORATIONS MUST ANSWER THE FOLLOWING:

NAME AND TITLE	ADDRESS	PHONE NUMBER

7. If a Corporation, list names and address of persons holding more than 25% of the stock on a separate sheet.

7a. STATE INCORPORATED	7b. CORPORATE NO.	7c. DATE INCORPORATED	7d. LIST NAME AND ADDRESS OF PERSON IN CALIFORNIA AUTHORIZED TO ACCEPT SERVICE OF SUMMONS

8. Who is your supplier(s)? (Give name, address, and phone number) _____

9. Sales are made to: **RETAIL STORES** _____ **WHOLESALE CUSTOMERS** _____ **HOME DELIVERY** _____

10. Do you purchase any bulk milk? **YES** _____ **FROM WHOM:** _____ **NO** _____

APPLICATION MUST BE SIGNED BY THE INDIVIDUAL, BY A MEMBER OF THE PARTNERSHIP, OR OFFICER OF A CORPORATION UNDER PENALTY OF PERJURY.

SIGNATURE OF APPLICANT	PRINT NAME	TITLE	DATE

ANSWER ALL QUESTIONS APPLICABLE TO YOUR BUSINESS ON THE REVERSE SIDE

NOTE: INFORMATION BELOW MUST BE COMPLETED UNDER PENALTY OF PERJURY
IMPORTANT

11. HAVE YOU OR ANY MEMBER OF THE PARTNERSHIP OR OFFICER OF THE CORPORATION EVER:

- BEEN DENIED OR REFUSED A LICENSE YES NO
- HAD A LICENSE REVOKED OR SUSPENDED YES NO
- HAD YOUR LICENSE PLACED ON PROBATION YES NO
- HAD PAYMENT MADE FROM A SURETY BOND YES NO

11b. HAVE YOU OR ANY MEMBER OF THE PARTNERSHIP OR THE CORPORATION FAILED TO PAY CALIFORNIA MILK PRODUCERS? YES NO

11a. HAVE YOU OR ANY MEMBER OF THE PARTNERSHIP OR OFFICER OF THE CORPORATION EVER BEEN CONVICTED OF A FELONY? YES NO

11c. IF SO, DO YOU STILL OWE PAYMENTS TO CALIFORNIA MILK PRODUCERS? YES NO

IF ANY OF THE ABOVE BOXES ARE CHECKED "YES", EXPLAIN FULLY ON A SEPARATE SHEET.

The Department of Food and Agriculture has established time periods for the processing of permit applications, in compliance with Government Code sections 15374 - 15378. Failure to comply with these time periods may be appealed to the Secretary of Food and Agriculture, 1220 N Street, Sacramento, CA 95814, pursuant to regulations set forth in Title 3, California Code of Regulations, section 301. Under certain circumstances, the Secretary may order that the applicant receive a reimbursement of filing fees.

ATTACH CHECK TO COMPLETED APPLICATION AND RETURN TO:

CASHIER, DEPARTMENT OF FOOD & AGRICULTURE
P.O. BOX 942872
SACRAMENTO, CA 94271-2872

DO NOT SEND COIN OR CURRENCY

FOR DEPARTMENT USE ONLY

RC: _____
 AMOUNT: _____
 LICENSE FEE: _____
 RC: _____
 AMOUNT: _____

DATE: _____
 LN: _____
 PENALTY: _____
 DATE: _____
 LN: _____

INSTRUCTIONS FOR COMPLETION OF APPLICATION FOR MILK HANDLER'S LICENSE - DISTRIBUTOR

Every person operating as a distributor and who qualifies under the following conditions is required to obtain a Milk Handler's License:

1. Any person who regularly operates mobile vehicles on routes predominately for the sale of dairy products on such routes to wholesale customers.
2. Wholesale customers only as to milk, cream, or any dairy product that is actively and directly processed, manufactured, or packaged by such wholesale customer.

"Distributor" does not include a wholesale customer that does not meet the requirements of item 2 above.

"Person" includes any individual, firm, corporation, partnership, association, nonprofit cooperative association, or any other business organization.

APPLICANT INSTRUCTIONS

Question 1

Enter the date your business began operation. If the business was purchased from an existing distributorship, enter the date you assumed responsibility of the operation. Include your business telephone number as well as fax number, if applicable.

Questions 2

Enter the legal name under which you will conduct business.

Question 3

Enter the physical or street address, including city and zip code.

Question 4

Enter the mailing address, if different from street address, e.g. P.O. Box number, city and zip code.

Question 5

Check the appropriate box if you will operate as an individual, partnership or corporation.

Question 6

List names(s), title(s), address(es) and phone number(s) based on your answer to question 5. If operating as a partnership or corporation, list all member names, titles, addresses and telephone numbers.

Question 7

For corporations only. On a separate sheet of paper list the names and addresses of persons who hold more than 25% of stock.

Questions 7a through 7d

7a. For corporations only. Enter the state in which your corporation is registered.

- 7b.** For corporations only. Enter your corporation number.
- 7c.** For corporations only. Enter the date your company incorporated.
- 7d.** For corporations only. Enter the name and address of person in California authorized to accept service of summons.

Question 8

Enter the name of your dairy supplier(s) from whom you purchase dairy products. Include the name(s), address(es) and telephone number(s). Use a separate sheet of paper if necessary.

Question 9

Check the appropriate box that dairy sales will be made to. Retail stores are defined as supermarkets, mom-and-pop type stores, gas station mini-marts, convenience stores, etc., or any other establishment that buys packaged milk, cream, or any dairy product for resale to consumers.

Wholesale customers are defined as persons other than a distributor that buys packaged milk, cream, or any dairy product for resale to consumers or to other wholesale customers.

Home delivery is defined as sales made directly to a consumer's dwelling.

Question 10

By answering "yes" means you purchase milk or cream which has not been pasteurized or packaged in bottles, cartons, dispenser cans, or other consumer packages, and which is handled or delivered, in bulk, in tanks, cans, or other bulk containers. If answering "yes", enter the name of your supplier. If this does not apply to your operation, check "no".

Questions 11, and 11a. through 11c.

If your operation is a partnership or corporation, ensure that your answers take into consideration individual members within a partnership or officers within a corporation. For those boxes check "yes", please explain fully on a separate sheet of paper.

The application must be signed by the individual, or a member of the partnership or officer of the corporation. Please also legibly print the applicant's signature along with the title and date the application was signed.

A self-addressed return envelope is enclosed for your convenience. **Make your check payable to "Cashier, CDFA-34004-L".**