

APPLICATION FOR PUBLIC WAREHOUSE OPERATOR LICENSE

Applicant Name: Address: City, State, Zip: Telephone: Email:		Business Name: Address: City, State, Zip: Telephone: Email:
Excepting frozen food locker plant be licensed by the Secretary of Agr		produce* for hire in quantities of 1,000 pounds or more shall first
I am applying for a Public Wa apply:	rehouse Operator License for t Eggs	the storage for hire of the commodities listed below: (Check all the
*Produce means fruit or vegetable (incl herbs	uding mixes of intact fruits and vegetable	es) and includes mushrooms, sprouts (irrespective of seed source), peanuts, tree nuts, a
	Each Separate Place of Business	Shall Be Licensed Annually by January 1
Deter		Signature:
Date:	— Vermont Agency of Agriculty	re Food & Markets, Food Safety Consumer Protection
Please remit payment of \$125.00 o:	Division 116 State Street Montpelier, Vermont 05620-2	
<u>RI</u>		TO SIGNING APPLICATION FORM
By signing This License You Certify Standing You May Be Subject To P	_	ith the Requirements Below. If You Certify Falsely That You Are In Good
By law (15 V.S.A. Section 795), the standing with any order to pay child	-	ade or business unless the licensee first certifies that he or she is in good
•		iness or trade unless the licensee certifies, under the pains and penalties of the maximum penalties for perjury are fifteen (15) years in prison, a \$10,000
Good standing means:	- the immediate payment would	a State authorized payment plan; or cause unreasonable hardship. (If you are claiming agency for further information.)
For further information the licensee		
		m in good standing with respect to any obligation for child at I am in good standing with respect to all taxes due to the State
Date:	<u> </u>	Signature: