

EGG HANDLER AND PRODUCER REGISTRATION FORM

517-004a (Rev. 12/20)

Egg Safety and Quality Management Program
1220 N Street, Sacramento, CA 95814
Phone: (916) 900-5062 Fax: (916) 900-5359
E-mail: CDFA.ESQM_inquiries@cdfa.ca.gov
E-mail. CDFA.E3QM_mquines@cula.ca.gov

DEPARTMENTAL USE ONLY							
Handler Code	Initials						
CA-							
Billing Type: Monthly	Annual Exempt						

Section 1: Applicant Inform	ation							
Business Name:					Business Phone:			
Premise Address: Street		City:		Stat	e:	Zip:		
Mailing Address: Street		City			e:	Zip:		
Walling Address. Street		City:			C.	Σίρ.		
Contact Person: Con	tact Phone:	Contact	E-mail:					
		'						
Section 2: Business Informa								
Business Type: (Check Applicable Boxe Producer ONLY Page 1996	cable Boxes) Packer ONLY Producer/Packer		er/Packer	Distributor/Wholesale				
Business Entity:								
Owners/Members of Partnership/Officers of Corporation	Addre	Address			Phone Number			
Section 3: Flock/Egg Inform	ation	•		•				
Egg Product Type(s): (Check Applicable Boxes) Shell Eggs Liquid Eggs Dry Eggs								
USDA Grading Program? P Flock Information:								
Species of Fowl:		Chicken	icken Duck		uail	Other		
Approximate Amount of Laying Flock								
Approx. Cases of Shell Eggs Graded/Produced/Handled Monthly: (1 Case = 30 Dozen Shell Eggs)								
Approx. Cases of Liquid Egg Products Processe (1 Case = 40 lb Liquid Eggs)								
Approx. Cases of Dry Egg Products Processed/I (1 Case = 9 lb Dry Eggs)	landled Monthly:							
Organic Eggs: For more info, visit https	://organic.cdfa.ca.go	v/OrganicReg	<u>'</u>					
CA Organic Registration Number: USDA Certification Number:								
Special Requirement Eggs: (i.e. Higher omega,	pasture raised, cage free, f	 free range, balut,	etc.					

Section 4: N	1ill Fee Resp	onsibility							
Do you sell ALL your eggs to consumer on your premises?				Do you purchase eggs/products from out-of-state egg handlers?					
☐ Yes ☐ No		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					
Do you purchase eggs/products from in-state producers? Yes No				Do you sell or plan to sell at Certified Farmers Markets? Yes No If yes, list county(s):					
	ness, handler co	ne mill fee for you, <i>please su</i> de (if known), and approxim lress			company				
		ill fee, provide the name of a additional paper if neede		nandler code (if	known),	and approxima	te number of cases		
Handler Code					Approx	k. Cases			
Section 5: Co		signee Information	(applies	to Out-of-	State	Registrants	s only)		
Resident Agent Add	ress:		City:			State:	Zip:		
Resident Agent Phone Number:			E-mail Address:				1		
Registration	Fees:			C	1.1	1 1			
Required Fee:					nplete and make remittance payable to: gSafety and Quality Management				
Registration R	enewal Fee	\$75	Lgg Safety and Quanty W			•	iagement		
Optional Fee:			P.O. Box 942872						
Inspection Manual \$15				Sacrar					
Total Fees:				*Check or money orders only					
All Registration	s expire at the	end of the <u>calendar year</u>	regardle	ss of when pay	ment w	as received.			
penalty of perjuunderstand all l	iry and submitt aws and regula	ed by an owner, a membe ed with an original signat tions relating to the prep nia and that all informati	cure. By signaration fo	gning this regis r market and n	tration [.] narketir	form, you dec ng of shell egg	lare that you		
Signature		Print N	ame				Date		