



Arizona Department of Agriculture (ADA)

Central Licensing Section
1688 W. Adams
Phoenix, AZ 85007
Phone: (602) 542-4499 Fax: (602) 542-0466

For ADA/ASD Use Only

New License No. _____
(Cash) or Check # _____
Check Date _____
Amount _____
Line No. _____
ID No. _____

Arizona Egg License Application

Pursuant to (ARS 3-714) Fee: \$25.00

Each applicant for a license shall state the name and address of the applicant, the location where the business of the applicant is being or intended to be conducted and that the applicant will, in the conduct of the business, comply with A.R.S. Article 1, Chapter 5, and the rules and regulations promulgated under authority of Arizona Revised Statutes.

License Type Information

(Please select one.)

- EGG DEALER:** (Resells eggs purchased from another entity)
- PRODUCER-DEALER:** (Produces and sells eggs and/or resells eggs purchased from another entity)

Applicant Information

Application Date: _____
Name of Applicant: _____
Applicant's Title: _____
Street Address: _____
City: _____ State ____ Zip _____
Applicant's Phone No: () _____

Business Information

Mailing Address

Physical Plant Address

Name of Company: _____	Address: _____
Street Address: _____	City: _____ State ____ Zip _____
City: _____ State ____ Zip _____	
Company Contact: _____	
Phone No: () _____ Fax: () _____	
Tax ID No: _____	

Signature

I DO HEREBY DECLARE THIS REPORT IS TO THE BEST OF MY KNOWLEDGE TRUE, CORRECT AND COMPLETE.

(Please Print Name) Signature Date