



Arizona Department of Agriculture (ADA)
 Environmental Services Division- Feed
 1688 W Adams
 Phoenix, AZ 85007
 Phone: (602) 542-3578 Fax: (602) 542-0466

FOR ADA/ESD USE ONLY	
Date Received:	_____
Check #:	_____
Check Date:	_____
Check Amount: \$	_____
Line #:	_____

NEW - COMMERCIAL FEED LICENSE APPLICATION

Company Name: _____

Contact: _____

Fed. Tax ID#: _____ E-mail: _____

Mailing Address: _____

Physical Address: _____

PHONE: _____ LICENSE NO. _____

Division or c/o: _____

Tonnage Address: _____

PHONE: _____ FAX: _____

* Application will not be processed without a tax ID number or labels.

Under A.R.S. 3-2609, no person may manufacture or distribute commercial feed in this state without a commercial feed license from the division. A separate application is necessary for a commercial feed license for each manufacturing or distribution facility.

Mail labels, completed application and fees to the address above.

The Department is required by law to process completed applications within fourteen days from date received. Incomplete applications will be returned.

License Option \$10 per year: 1 year 2 years

Under AAC R3-3-902(A)(1) any person applying for a new commercial feed license to manufacture or distribute commercial feed must submit a copy of each commercial feed label intended for distribution within the state. A replicate of your proof sheet, either by hard copy or in electronic format may substitute. Do NOT submit the actual containers or packaging.

Applicant Name/Title: _____

The undersigned hereby makes application for a new commercial feed license, pursuant to A.R.S. 3-2609. By my signature below I agree to conduct business as a commercial feed licensee pursuant to Title 3, Arizona Revised Statutes and rules adopted pursuant thereto. The information contained in this application is true and accurate to the best of my knowledge. I understand that providing false information is a felony in Arizona.

Signature: _____ Date: _____