

**Incomplete applications cannot be processed and will be returned.
Be sure to fill out all fields.**

1. FIRM INFORMATION

Firm Name (Doing Business As)

Street Number City/Town State Postal Code County

Phone # Fax # Federal Identification Number

Website Address

First & Last Name of Registered Agent, Responsible Party or Legal Representative

Email Address Primary Phone Cell/Secondary Phone

2. LICENSE INFORMATION

Each plant and business location requires a Fertilizing Materials License.

Refer to Section 14591(a) of the California Food and Agricultural Code

Location of plant or business to be licensed _____
Country

Street Number City/Town State/Territory Postal Code County

Please check one:

- Individual Partnership Co Partnership
 Limited Liability Company (LLC.) Corporation Other

Mailing Address – if different from license location information above:

Street Number City/Town County

State/Territory Postal Code Country

Manager/Emergency Contact _____
First & Last Name

Email Address Primary Phone Cell/Secondary Phone

