



COLORADO

Department of Agriculture

Inspection & Consumer Services Division
Farm Products Program: (303) 477-0054

Farm Products Dealer License Application

January 1 - December 31 (Year)

Application Fee:

Make check payable to: Colorado Dept. of Agriculture

Mail payment and application to: Colorado Dept. of Agriculture/ ICS
2331 West 31st Avenue
Denver, CO 80211

Table with 2 columns: Fee Description, Amount. Rows include (4540) License: New ___ Renewal ___ \$275.00, (4610) Penalty (after Dec. 31st) \$50.00 \$____, Total amount enclosed \$____

All payments must be payable in U.S. dollars and checks must be drawn on a U.S. bank or the payment and this form will be returned.

Note: Applicant's name and address must match Legal Business Name

Form with 4 rows for applicant information: 1. Business Name of Applicant, 2. Principal Business Address, Mailing Address (if different), 3. Phone Number, County, 4. Email Address

5. (Check one) This business is operating as a(n): ___ Individual/Sole Proprietorship* ___ Partnership ___ Corporation ___ Other (Describe):

*If you are operating as an individual/sole proprietorship, you must complete the "Citizenship/Immigration Status Verification Form"

6. State kind(s) of farm products handled:

7. Are you engaged in the business of BUYING farm products from Colorado producers or Dealers? Yes:___ No:___

If YES, state your annual dollar volume of purchases of farm products from Colorado producers or dealers: \$_____

8. Do you solicit or negotiate the sale of farm products between the vendor and purchaser respectively? Yes:___ No:___

9. Do you receive on consignment or handle any farm product on a commission basis? Yes:___ No:___

10. Do you have a Packers & Stockyards Act Bond? (Livestock Dealers Only): Yes:___ No:___

Note: Out of state applicants must furnish the Commissioner documentary evidence of such bond.

11. Do you have an agent representing your firm in Colorado? Yes:___ No:___

List all agents acting on your behalf on a separate sheet and attach to application.

12. List person(s) authorized to receive and accept service of summons and legal notices of all kinds for the applicant in the state of Colorado. (Name and complete address)

Name: _____ Address: _____

I understand that as a dealer I must comply with all requirements of the Farm Products Act (Title 35, Article 37, Sections 101 et. Seq. C.R.S.). I understand that making false statements on this application is punishable by law. I certify that all the statements made in this application are true, correct, and complete to the best of my knowledge and belief, and are made in good faith.

Legal Name of Applicant: _____

Date: _____ Signature: _____