

**West Virginia Department of Agriculture**

Code No. 150

Attn: Administrative Services Division  
1900 Kanawha Blvd., East  
Charleston, West Virginia 25305-0170  
Phone: 304-558-2226 FAX: 304-558-3594

**Application for Egg Distributor Certificate of Authorization  
for the period July 1 through June 30**

Application is hereby made and a fee of ten dollars **(\$10.00)** is enclosed for an Egg Distributor Certificate of Authorization.

**INSTRUCTIONS:** Please make check or money order payable to the West Virginia Department of Agriculture. Return this application and the required fee in an envelope to the above address.

**FEIN:** \_\_\_\_\_

**Firm Name (dba):** \_\_\_\_\_

**Location:** \_\_\_\_\_

*Street Address* \_\_\_\_\_ *City* \_\_\_\_\_ *County* \_\_\_\_\_ *State* \_\_\_\_\_

**Phone Number:** \_\_\_\_\_ **FAX:** \_\_\_\_\_

**WVPROD:** \_\_\_\_\_

**Official Mailing Address:**

*PO Box/Street* \_\_\_\_\_ *City* \_\_\_\_\_ *County* \_\_\_\_\_ *State* \_\_\_\_\_

**Phone Number:** \_\_\_\_\_ **FAX:** \_\_\_\_\_

**Email:** \_\_\_\_\_

**Owner:** \_\_\_\_\_ **Manager:** \_\_\_\_\_

**Person to receive official notices:** \_\_\_\_\_

**Kind of Operation:**

	Yes	No
Do you pack and distribute eggs <b>ONLY</b> from your own flocks?	<input type="checkbox"/>	<input type="checkbox"/>
Do you pack and distribute eggs from your flocks <b>AND</b> those owned by others?	<input type="checkbox"/>	<input type="checkbox"/>
Do you pack and distribute eggs produced by flocks <b>NOT</b> owned by you?	<input type="checkbox"/>	<input type="checkbox"/>
Do you distribute (wholesale) eggs that are packed by other firms?	<input type="checkbox"/>	<input type="checkbox"/>

**APPROXIMATE ANNUAL VOLUME IS:** \_\_\_\_\_ cases (30 dozen/case)

**If you own a flock, the Flock Size is approximately** \_\_\_\_\_ birds. **Breed:** \_\_\_\_\_

**List the Brand Names you handle:**

I certify that the above information is true and correct and that a check or money order made payable to the West Virginia Department of Agriculture is attached. I understand that the Commissioner of Agriculture has the authority to deny this permit application should he find cause to do so, under authority of West Virginia Code 19-11-3.

\_\_\_\_\_  
**Signature of Authorized Representative** **Printed or Typed Name and Title** **Date**

**WVDA Egg Co. No.:** \_\_\_\_\_