625 Robert St. N., St. Paul, MN 55155-2538 www.mda.state.mn.us

Plant Protection Division, Ph. 651-201-6620

Entity ID:

20___ NEW APPLICATION FOR WHOLESALE PRODUCE DEALER

Minn. Stat. 27.03(1)

License Period July 1 to June 30

The data on this form will be used to process your application. You must provide your Minnesota Tax ID number. If you do not have one, you must provide your social security number (MS Sec 270C.72). We are required by law to collect this information and we cannot grant your license without it. No one will have access to your social security number except those permitted access by law, your written consent, court order, or those department employees whose job duties require access. If you are unsure if you need a Minnesota Tax ID, contact the Minnesota Department of Revenue at www.taxes.state.mn.us.

conta	ct the Minnesota Department of Rev	enue at www.taxes.sta	ate.mn.us.	, ,				
Le	gal Name			MN Tax ID or if none, Social Security				
DBA (if different)				Mailing Address (if different):				
Ph	ysical Street Address (No Po	O Box)		City	State	Zip Co	de	
Cit	у	State	Zip Code	Company Telephone				
Co		need to be licens		ckholder patrons, you are not co s than 75%, you are defined as a				
LIC	CENSE FEES: (Use the w	vorksheet below to	o calculate total fees	due)				
1.	vegetables, milk, eggs, and poultry) purchased or contracted from Minnesota farmers and other wholesale produce dealers during the previous 12 months. If you have made no purchases in the past year, enter zero.							
3.	\$75.00 application fee.		\$	<u>75.00</u>				
4.	Add lines 2 and 3. This is y	600378(3	100) \$					
5.	If the fees are mailed after month the fee is late.	600378(3	510) \$					
6.	A certified copy of the license must be posted at all branch locations where produce is purchased. Number of certified copies needed x \$20.00 = [Attach a list of locations and branch managers.]					110) \$		
7.	Persons soliciting produce Identification Card. Number [Attach a list of buyers, a	600380(3	190) \$					
8.	Trucks used to purchase or solicit produce are required to display a sticker identifying them as a licensee. Number of truck stickers needed x \$10.00 =					190) \$		
	Return this form with your MINNESOTA DEPARTMEI Attn: Ca: 625 Robert St Saint Paul, MN Licenses are not transferable	NT OF AGRICULTURI shier reet North 55155-2538	E TO1	TAL FEES DUE (Add lines 4	·	\$ ************************************		
I he	ereby certify that the information	contained in and su				Office Use	Only	
Sig	gnature:		Date	e:		O.1100 000	O.I.,	
Na	ame (Please print):		Title	e:				
Contact Telephone: Fax Number:								
E-	mail Address:							

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NEW APPLICATION FO	R WHOLES	ALE PRODUCE DEALE	R LICENSE NUMI	BER:_								
Workers' Compensation: Do you have any paid or of		pensated employees in Minn	nesota? 🔲 Yes 🔲 No If yes, o	comple	te the follow	ring information:						
Insurance Company Na	me:		Effective Date:									
Policy #:			Expiration Date	e:								
You must provide acceptable evidence of compliance with the Workers' Compensation Insurance Law (MS Sec 176.182). If you are self-insured, attach a copy of the exemption order from the Commissioner of Commerce authorizing self-insurance. For questions, contact the Minnesota Department of Labor and Industry at www.doli.state.mn.us.												
The following produce is subject to the Minnesota Wholesale Produce Dealer Act, Minnesota Stat. Section 27.01(2). What produce do you purchase or contract for?												
☐ Milk ☐ Eggs			☐ Poultry									
☐ Potatoes		Fruit	☐ Vegetables									
Wholesale Produce Dealer - The following businesses need to be licensed as Wholesale Produce Dealers if they are purchasing or contracting produce subject to MN Statute 27.01. Which one best describes your business?												
☐ Wholesaler ☐ Ca	annery	☐ Food Manufacturer	☐ Food Processor		Broker	□ Retailer						
If you are a retailer, do you	ı purchase fro	om Minnesota farmers or farr	n cooperatives?		Yes	☐ No						
If you are a broker, do you	collect a fee	only and make no purchase	s?		Yes	☐ No						
In the following questions, the amount purchased refers to all purchases paid by check or paid for beyond 24 hours after the produce was received. The amount purchased or contracted for from Minnesota farmers and other Minnesota Dealers for above produce during the previous 12 months, if any:												
Previous 12 months total:			\$									
Highest monthly amount:			\$									
Estima	ited amount fo	or the next 12 months:	\$									
Minnesota Statute 27.04(2) requires the following information to be submitted with the application: (a) Most recent financial statement. (b) Names and addresses of all shareholders who own 5% or more of the corporation's shares of stock (c) Copies of any contracts with sellers or producers (not public information). (d) Has the applicant or any of its partners or agents been involved in any litigation relating to the businesss of a wholesale producer in the past 5 years?												
☐ Yes	☐ No	If yes, explain:										
Type of Business												
□ Sole Proprietorship □ Corporation/LLC □ Partnership □ Cooperative												
If corporation, give the sta	ate of incorpo	ration:										
Names and Titles of Ind	ividuals/Offi	cers Operating Business:										