



North Carolina
Department of Agriculture
and Consumer Services
Budget and Finance Divisions

Steve Troxler
Commissioner

N. David Smith
Deputy Commissioner

Catherine Stogner
Director

Randi Barham
Field Auditor

APPLICATION FOR FEED AND CANNED PET FOOD REPORTING PERMIT

Date _____ Name of Firm _____

Address _____ Phone: _____

To: Randi Barham, Auditor
NCDA & CS, Budget & Finance Div.
1085 Mail Service Center
Raleigh, NC 27699-1085
Phone: (919) 707-3041 Fax (919) 733-1041

Application is hereby made for a permit to pay to the North Carolina Department of Agriculture and Consumer Services at the close of each quarter the inspection fee of \$0.12 per ton by the reporting system on commercial feeding stuffs and \$0.03 per 48 can case on canned pet food, as provided for in Chapter 106-284.40, Article 31C of the General Statutes of North Carolina as amended by the General Assembly of 1989.

I agree to keep satisfactory and necessary records to indicate the tonnage and kind of commercial feeding materials or canned pet food sold in the State of North Carolina and further, agree to grant to the Commissioner of Agriculture, or his legal agent, permission to examine our records to verify our statement of tonnage.

I further agree to make report of tonnage and pay inspection fee by calendar quarters covering commercial feeding materials and canned pet food sold in the State of North Carolina during the preceding quarter, and to comply with all other provisions of said law and all rules and regulations established thereunder.

I understand that name of Company indicated above and appearing on label of product as manufacturer is responsible for submitting the inspection fee reports and payment to the North Carolina Department of Agriculture and Consumer Services as instructed.

I further understand that failure of above mentioned Company to properly file and sign inspection fee reports will be grounds for cancellation of permit and registration(s).

Will you sell horse feed or supplements? Yes No

Records will be available for Audit at the following address: _____

Federal ID# _____

Applicant's Signature _____

Soc. Sec. # _____
(For Individuals/Proprietorships)

Printed Name & Title _____

Phone: _____