N.C. DEPARTMENT OF AGRICULTURE MEAT & POULTRY INSPECTION DIVISION REGISTRATION OF MEAT & POULTRY HANDLERS

NOTICE OF REGISTRATION BY NCDA			
REGISTRATION NO.	DATE OF REGISTRATION		
TITLE OF NCDA OFFICIAL	SIGNATURE OF NCDA OFFICIAL		

NAME OF FARM/BUSINESS		PHYSICAL ADDRESS	
PHONE NUMBER	EMAIL ADDRESS		
		MAILING ADDRESS	
COUNTY	HOURS OF OPERATION		
NAME OF OWNER/MANAGER		TYPE OF ORGANIZATION:	
		Distributor, Warehouse, Transporter	
		Salvage, Food Bank, PEO	
		Restaurant, Retail, Custom Exempt, Abattoir, Misc	
Describe the general nature of your own business. Also describe separately the nature of the business of your subsidiaries, if any, if this is different this is different from that of the parent firm.			
REMARKS			

AGREEMENT AND CERTIFICATION: If Meat and/or Poultry Handler's registration is granted under this application, I expressly agree to comply with all requirements of the N.C. Compulsory Meat Inspection Law (Chapter 106, Articles 49B and 49C of the General Statues of North Carolina), the N.C. Poultry Products Inspection Law (Chapter 106, Article 49D of the General Statues of North Carolina), or both as well as 9 CFR 320.5 and/or 9 CFR 381.179, incorporated by reference under 02 NCAC 52D .0101. I agree to be available for periodic reviews of my facility to ensure compliance with NC Meat and Poultry laws and rules. I acknowledge that, and consent to, my business name, address, phone number and registration number being included on a published list of registered Meat and Poultry Handlers. I certify that all statements made herein are true to the best of my knowledge and belief.

This is an Equal Opportunity Program. If you believe you have been discriminated against because of race, religion, color, national origin, ethnicity, sex, pregnancy, gender identity or expression, sexual orientation, age, political affiliation, National Guard or veteran status, genetic information, or disability, write to: State Director, NCDA&CS-MPID, Agriculture Building, 1001 Mail Service Center, Raleigh, NC 27699-1001.

CERTIFICATION OF FIRM				
DATE	TITLE	TYPED OR PRINTED NAME	SIGNATURE	