



COMMERCIAL FEED MANUFACTURER'S LICENSE APPLICATION
NORTH DAKOTA DEPARTMENT OF AGRICULTURE
REGISTRATION DIVISION
SFN 17920 (4-09)

Applicant Name	Email Address		
Company Name	Telephone Number		
Company Mailing Address	City	State	Zip Code
Company Street Address	City	State	Zip Code
Were you previously registered as a retailer? <input type="checkbox"/> No <input type="checkbox"/> Yes (License Number)			County

Are you a licensed FDA Medicated Feed Mill	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Do you manufacture medicated feeds?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

NOTE TO APPLICANTS:

A license is required for each person who manufactures commercial feed or whose name appears on the label of a commercial feed. The license fee is \$100.00. Licenses expire December 31st of each biennium.

Typed or Printed Name and Title of Person Signing Application	
Signature of Applicant	Date of Application

Do not write below this line.

Approved By	Date
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REMIT TO: NORTH DAKOTA DEPARTMENT OF AGRICULTURE
600 E. BOULEVARD AVE - DEPT 602
BISMARCK, ND 58505-0020
(701) 328-1500