

APPLICATION FOR FARM MARKET RETAIL CERTIFICATE OF REGISTRATION

(Farm Market license allow you to sell only **your** production)

License Fee \$20.00

Check/MO _____

Cash _____

(not responsible)

County: _____

1. Number of laying hens _____

2. Name and location of market(s) where you will be selling eggs

3. Market day(s) and times _____

The undersigned hereby applies for a Retail Certificate of Registration, as amended in 2009, granting authority to sell eggs in the State of Indiana under the provisions of the Indiana Egg Law as authorized in the Indiana Code 16-42-11.

Farm Name: _____

Owner: _____

Physical Address: _____

City State, Zip: _____

Telephone: _____

Email: _____

(Signature required by law)

Make checks payable to: **Indiana State Egg Board**

Return signed application and payment to:

web site: www.ansc.purdue.edu/ISEB

Indiana State Egg Board

Purdue University

Creighton Hall of Animal Science

270 S Russell Street

West Lafayette IN 47907-2042

(phone: 765-494-8510)

MAILING ADDRESS IF DIFFERENT THAN REVERSE SIDE

Change of ownership and/or store name: Make corrections on application and return to Indiana State Egg Board.

Please allow 3 weeks for processing and mailing the Certificate of Registration.

Certificate of Registration is to be posted in a conspicuous location, and available for inspection.