

STATE OF NEW JERSEY
DEPARTMENT OF AGRICULTURE
DIVISION OF MARKETING AND DEVELOPMENT
P. O. BOX 332
TRENTON, NEW JERSEY 08625-0332
PHONE: (609) 292-5647 - FAX (609) 984-2508 - MilkDealers@ag.nj.gov
www.nj.gov/agriculture

APPLICATION FOR MILK DEALER'S LICENSE

PLEASE PRINT OR TYPE - COMPLETE BOTH SIDES

The undersigned hereby applies for a license to purchase, distribute and/or sell milk pursuant to the provisions of N.J.S.A. 4:12A-1 et seq., as amended, for the period commencing _____ and ending _____

1. Full Name of Applicant _____
(if corporation, give exact title; if partnership, give name of firm)

2. Mailing Address _____
(Number and Street) (City) (State) (Zip Code)

Physical Address _____
(Number and Street) (City) (State) (Zip Code)

3. _____
(Phone Number) (Fax Number) (E-Mail Address)

4. Is the business of the applicant owned by: An individual A partnership A corporation
 A cooperative Other (explain) _____

5. State business or trade name(s) used, if any _____
Where filed? _____

6. (a) If partnership:
Name and Address of Each Partner

(b) If corporation:
In what state incorporated: _____ Date of incorporation _____
Principal office in State of New Jersey _____
Resident Agent _____ Address _____

PLEASE NOTE: ALL OUT OF STATE CORPORATIONS MUST LIST A PRINCIPAL OFFICE AND RESIDENT AGENT IN THE STATE OF NEW JERSEY

Officers
Name and Address
President _____
Vice President _____
Secretary _____
Treasurer _____
Directors _____

7. (a) Is applicant a subsidiary of, affiliated with, or associated either directly or indirectly with any other corporation or company? (This includes corporations and companies not involved in any way with milk.) Yes No

(b) If yes, explain nature of same fully (attach continuation sheet if necessary)

8. How many milk routes will be operated in New Jersey?

Retail _____ Wholesale _____ Combination _____ Total _____

9. Do you hold a current permit from the New Jersey State Department of Health? Yes No

10. Check EACH item that applies to your business: (Attach additional sheet if necessary)

- | | |
|---|---|
| <input type="checkbox"/> Process and Packaged Milk/Milk Products | <input type="checkbox"/> Sell Milk/Milk Products to Stores and Consumers |
| <input type="checkbox"/> Purchase Packaged Milk/Milk Products from:
(List all sources) | <input type="checkbox"/> Sell Milk/Milk Products to Other Dealers
(List all, including former sub dealers) |

Manufacture only and/or Sell Milk only in another state

11. ATTACH financial statement (operating statement and balance sheet) for the most recent fiscal year. Dealers with gross sales of less than \$100,000 per year may file (in lieu of the operating statement and balance sheet) either one of the following:

- (1) Copy of Internal Revenue Service Form for Corporation (Form 1120) or Schedule C from Individual Form 1040, or
- (2) Financial Statement Forms available from Division of Marketing and Development.

12. License Fee*

THE APPLICANT CERTIFIES THAT HE HAS HERETOFORE AND IS NOW COMPLYING WITH THE MILK CONTROL ACT OF THE STATE OF NEW JERSEY AND WITH ALL THE ORDERS AND REGULATIONS OF THE DIVISION OF MARKETING AND DEVELOPMENT, AND WILL CONTINUE TO DO SO, AND FURTHER, THAT HE WILL COMPLY WITH ALL FUTURE ORDERS AND REGULATIONS PROMULGATED BY SAID DIVISION.

THE APPLICANT HEREBY REPRESENTS THAT THE STATEMENTS MADE IN THIS APPLICATION AND SUPPLEMENTARY STATEMENTS AND SCHEDULES ARE HEREBY MADE A PART OF THIS APPLICATION AND ARE TRUE AND CORRECT.

Date at _____ this _____
(Full Name of Applicant - Print or Type)

_____ day of _____ 20_____
(Signature) (Title)

NOTE: If partnership, firm name must be inserted and each partner must sign individually. If corporation, corporate name must be inserted in full and signed by one of the corporate officers. (CORPORATE SEAL MUST BE IMPRESSED)

(Signature) (Title)

(Preparer's Name - Print or Type) (Phone Number)

(E-Mail Address)

PLEASE NOTE: Financial statement (Item 11) must accompany completed application. All applications received without the financial statement will be returned.

Every milk dealer shall pay a fee of \$0.025 per hundredweight of milk sold for consumption within the State excluding dealer to dealer sales, but a milk dealer processing milk for sale to other dealers shall pay a minimum fee of \$1,625.00 per year and a milk dealer selling to stores and consumers shall pay a minimum fee of \$75.00 per year.

A milk dealer engaged in handling milk in the State of New Jersey but selling milk only in another state or engaged only in manufacturing shall pay a license fee of \$375.00 per year.

A milk dealer who during the year prior to the one for which the application is being made sold a quantity of milk which would yield a fee of less than \$300.00 per year may pay his full fee at the beginning of the license year based upon the prior year's business. Milk dealers paying monthly shall pay the fee by the twentieth of each month for the previous month.