

Application For A Fish Processing Plant License

Type of Application: Renewal Re-issuance New FP# _____

Name of applicant: _____

Postal Address: _____

Name and address of company: _____

Contact Name & Title: _____

Location of Plant: _____

Phone (Home): _____ Phone (Bus.): _____ Fax: _____ Cell Phone: _____

Email Address: _____ Web Site: _____

Proposed production start-up date: _____ 20 _____

Surface area of plant: _____

Species to be processed: _____

Source of supply: _____

Quantity of fish estimated to be processed by species during the coming year: _____

Number of employees to be hired: _____ Part-time: _____ Full-time: _____

Duration of employment: Part-time: _____ (#mths) _____ (#wks) Full-time: _____ (#mths) _____ (#wks)

Other pertinent information to support your application: _____

Signature of Signing Official

Print Name & Title of Signing Official

Dated on _____

Signature of Inspector