APPLICATION FOR LICENSE TO OPERATE AS A MEAT AND POULTRY DISTRIBUTOR

West Virginia Department of Agriculture Animal Health/Meat and Poultry Inspection Bureau 1900 Kanawha Boulevard, East Charleston, West Virginia 25305 (304) 558-2206 Fax: (304) 558-1882

FY July 1, 2023 - June 30, 2024

(304) 558-2206	Fax: (304) 5	558-1882									1401	-8630-6893-9780	
SECTION 1: C	ISTRIBUTOR	R'S GENERAL [DATA										
A.	Establishment's Full Name												
В.	Owner, Manager, Partner, or Person authorized to represent the Establishment for contacts with Meat and Poultry Inspection Division:												
	Name: Title:												
C.	Location o	f Establishment	:		/			1		1	1		
				Route, Box, or	Street Addres	S	City		State	Zip		County	
D.	D. Mailing Address if different than above:						1	1		1	1		
				Route,	Box, or Street	Address	City		State	Zip		County	
E.	Business 1	Telephone:			Home Telephone Number:				Number:		Email:		
F.	Form of organization (Check one):												
G.	G. Do you conduct retail sales at your establishment?												
SECTION 2: F	REGULAR BU	SINESS HOUR	S (Write in hour	s for each day)									
Г	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday	Ī					
From	Worlday	Tuesday	vveunesday	Thursday	Filday	Saturday	Sunday						
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							Virginia, Chapter 19 that all statements n					ina	
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DATE OF APPLICATION PRINTED NAME SIGNING APPL								SIGNATURE OF AUTHORIZED PERSON MAKING THIS APPLICATION					
			SIGNING AI	FLICATION				!	MARING IIIIS	AFFEIGATION			
		DA USE ONLY											
Date Application Received:						\$5.00 APPLICATION FEE							
Batch Number:				-									
Directo	or's Approval:			-									
Establishm	nent Number:			-			STATEMENT OF POLICY REGARDING EQUAL OPPORTUNITY AND PARTICIPATION IN PROGRAMS - It is the policy of the West Virginia Department of Agriculture to provide its services and programs to all						
								gard to sex, race, co				i programs to all	

11-F003(C) Revised 6/11