

ODAFF
Food Safety Division
P.O. Box 528804
Oklahoma City, OK 73152
Phone: (405) 522-6119
Fax: (405) 522-1060



OFFICE USE ONLY
RECEIPT-#
AMOUNT-\$
DATE-

EGG PRODUCTS INSPECTION FEE REPORT

Name: _____ Address: _____

City: _____ ST: _____ Zip: _____ Phone: _____

REPORT FOR MONTH OF: _____ PERMIT # _____

ATTACH A SHEET DESIGNATING THE NAME AND ADDRESS OF EACH WHOLESALER AND/OR DEALER WHICH ARE SUPPLYING EGG PRODUCTS TO BE SOLD IN OKLAHOMA.

1. _____ Lbs. Of frozen or liquid ÷ 36 lbs = _____ Cases x .09 cents per case.
2. _____ Lbs. Of dried ÷ 9lbs. _____ = _____ Cases x .09 cents per case.
3. _____ Lbs. Of boiled eggs ÷ 50 lbs. = _____ Cases x .09 cents per case.
4. _____ Lbs. Of diced eggs ÷ 50 lbs. = _____ Cases x .09 cents per case.

1. TOTAL NUMBER OF CASES _____ X .09 CENTS PER CASE _____

2. MINIMUM OF 200 CASES X .09 PER CASE _____ \$18.00 _____

3. PAY GREATER DOLLAR AMOUNT OF LINE 1 OR 2. \$ _____

MONTHLY REPORTS PLUS REMITTANCE IN FULL MUST BE MAILED TO THIS DEPARTMENT ON OR BEFORE THE 15TH OF THE FOLLOWING MONTH. Failure to make full report and remittance by the date specified will result in a penalty and make your permit subject to cancellation.

Signature

Date

PLEASE MAKE CHECK PAYABLE TO OKLAHOMA DEPARTMENT OF AGRICULTURE, FOOD & FORESTRY ADDRESS ENVELOPE: ATTENTION FOOD SAFETY DIVISION.