State of California Department of Food and Agriculture Standardization/CA Citrus Programs 51-022-R (Rev. 07/2019)



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RENEWAL REQUEST FOR EXPERIMENTAL PERMIT

Permit Number Requested to Be Renewed:		Commodity:
Name of Applicant:		
Address:		
City:State:		
Phone:Email Address:		
Is this the address where the permit will be used and/or shipment records will be kept? □Yes □No If NO, Explain:		
Number of Containers Shipped Under Previous Permit: Shipment Dates Permit Was Used:		
Shipment Dates Permit Was Used: Date of FIRST Shipment: / /	Through LAST	Shipment Date: / /
Date of Firth Strainpinient.	_ Illiough LAST	Shipment Date. / /
Has any information changed regarding container manufacturer/supplier?: □Yes □No If YES, Explain:		
Please fax or attach a copy of the permit with request for renewal		
Signature of applicant:		Date: