



Florida Department of Agriculture and Consumer Services
 Division of Food Safety
 Bureau of Dairy Industry

**APPLICATION FOR LICENSE
 AS A WHOLESALE MANUFACTURER
 OF FROZEN DESSERTS AND/OR MIX**

**NICOLE "NIKKI" FRIED
 COMMISSIONER**

Section 502.053, Florida Statutes Rule 5K-10.002(3)(b)1, F.A.C

Remit \$200 Application Fee and Submit with
 Required Documentation Online at:
www.FDACS.gov

- or -

Check or Money Order Payable to FDACS
 and remit to:

FDACS
 P.O. Box 6720
 Tallahassee, FL 32314-6720

(850) 245-5410 – Phone

Note: All documents and attachments submitted with this request are subject to public review pursuant to Chapter 119, F.S.

Initial License Fee: \$200, §502.053 (2), Florida Statutes, for each wholesale manufacturer of frozen desserts and/or frozen desserts mix location. There is an annual renewal fee of \$100 due June 30 of each year. **Please submit a check or money order in the amount of \$200 payable to the Florida Department of Agriculture and Consumer Services (FDACS).**

Pursuant to the requirement of the Milk, Milk Products and Frozen Desserts Law, Chapter 502, Florida Statutes and Chapter 5K-10, Florida Administrative Code, I, _____, hereby make application for a state license as a wholesale manufacturer of:

BUSINESS INFORMATION – CHECK BOTH IF NECESSARY

Frozen Desserts <input type="checkbox"/>	Frozen Desserts Mix <input type="checkbox"/>
Will you make your own mix? <input type="checkbox"/> Yes <input type="checkbox"/> No	If No, please provide the name of your supplier:
Anticipated number of gallons of product manufactured or sold in Florida on an annual basis:	
Legal Name of Company:	
Trade Name or DBA:	
Type of Company (Sole Proprietorship, Corp., Partnership):	
Street Address of Facility:	
City, County, State, Zip:	
Permit Number Issued by Your State Agency & FEID No.	
Telephone Number/FAX Number:	
Web site/E-Mail:	
Contact Person: (Authorized to receive Departmental Notices)	
Title of Contact Person:	
Mailing Address:	
City, County, State, Zip:	
Telephone Number/FAX Number:	
Email:	

I agree to obey the Florida Milk, Milk Products and Frozen Desserts Law, Chapter 502, Florida Statutes, and all rules promulgated for its enforcement and recognize that this license may be revoked or suspended for cause.

Note: Applicants accompanying check will be negotiated by the Department as required by law. This act of negotiation has no bearing on applicant's entitlement and may not be used as a basis of estoppel or other doctrine impacting on the right of the Department to deny the permit or license sought.

Org. Code: 42 14 05 03 000
 EO A2
 Object Code: 002015 (\$200)

 Signature Company Representative

 Name / Title

 Date