BEGINNING MANIFEST NUMBER NOTIFICATION

Company Name

Address

City, State, and Zip Code

Company Name and Registration Number

will use

Preprinted Manifest Forms
Preprinted forms beginning manifest number ____________. (The beginning manifest number must be the next sequential number after the ending manifest number from the previous season.)

Computer (laser) Generated Manifest Forms
Computer (laser) generated forms beginning manifest number ____________. (The beginning manifest number must be the next sequential number after the ending manifest number from the previous season.)

If you are using computer (laser) generated manifest forms and currently have an inventory of preprinted manifests at your facility, supply the manifest number range ____________ thru ____________.

I/We hereby agree to comply with the Inspection Bureau policy and procedure on manifest use as set forth in the FreshNet/Shipper Handbook.

_________________________  ______________________
Signature & Title             Date

Please fax the completed form to Division of Fruit and Vegetables – Technical Section (863) 578-1901, or mail to Florida Department of Agriculture, Division of Fruit and Vegetables, Technical Section, 170 Century Blvd. Bartow, FL 33830.

FDACS-07119 Rev. 08/14