

Kansas Department of Agriculture 1320 Research Park Dr Manhattan, KS 66502 Phone 785-564-6700 Fax 785-564-6776 KDA.Dairy@KS.GOV

Revised 01/19

## APPLICATION FOR A MILK DISTRIBUTOR LICENSE

products.  For Calendar Year of January 1- December 31	Registration Fee <b>\$200.00</b>	New Renewal
-		
Street Address		
City	State	Zip Code
Phone Number	County	Federal Tax ID
	(if different than above for letters	
		 ger
Name of: Owner		-
Please check b	elow the products you will mov	e into Kansas for sale
Please check b	elow the products you will mov	re into Kansas for sale  Refer to Section T-7
Please check b Frozen Dairy Desserts Frozen Dairy Dessert Mixes	elow the products you will mov 	e into Kansas for sale
Please check b Frozen Dairy Desserts Frozen Dairy Dessert Mixes Grade A Milk and Milk Products Please give name, location of processing	elow the products you will mov g plants, and plant number	re into Kansas for sale  Refer to Section T-7  Refer to Section T-7
Please check b Frozen Dairy Desserts Frozen Dairy Dessert Mixes Grade A Milk and Milk Products Please give name, location of processing	elow the products you will mov	Refer to Section T-7 Refer to Section T-7 Refer to Section T-7 Refer to Section T-3A
Please check b Frozen Dairy Desserts Frozen Dairy Dessert Mixes Grade A Milk and Milk Products Please give name, location of processing List all products and brand names move If not enough space, please attach Monthly/Quarterly fees will be paid by	elow the products you will move	Refer to Section T-7 Refer to Section T-7 Refer to Section T-7 Refer to Section T-3A
Please check b Frozen Dairy Desserts Frozen Dairy Dessert Mixes Grade A Milk and Milk Products Please give name, location of processing List all products and brand names move	elow the products you will move	Refer to Section T-7 Refer to Section T-7 Refer to Section T-7 Refer to Section T-3A
Please check b Frozen Dairy Desserts Frozen Dairy Dessert Mixes Grade A Milk and Milk Products Please give name, location of processing List all products and brand names move  If not enough space, please attach Monthly/Quarterly fees will be paid by Name:	elow the products you will move	Refer to Section T-7 Refer to Section T-7 Refer to Section T-7 Refer to Section T-3A
Please check b Frozen Dairy Desserts Frozen Dairy Dessert Mixes Grade A Milk and Milk Products Please give name, location of processing  List all products and brand names move  If not enough space, please attach Monthly/Quarterly fees will be paid by  Name:  Address:  Phone Number:  I am familiar with the requirements of	elow the products you will move  g plants, and plant number  d into Kansas  a listing.  the Kansas Dairy Laws and regulated I will comply with the requirer	Refer to Section T-7 Refer to Section T-7 Refer to Section T-7 Refer to Section T-3A

DDL \_\_\_\_\_

ID \_\_\_\_\_

Issue Date \_\_\_\_\_