



TENNESSEE DEPARTMENT OF AGRICULTURE  
 CONSUMER & INDUSTRY SERVICES  
 ATTN: FOOD & DAIRY  
 BOX 40627 MELROSE STATION  
 NASHVILLE, TN 37204  
 PHONE# 615-837-5193 FAX# 615-837-5005  
 Newfood.business@TN.gov

## APPLICATION FOR EGG PROCESSOR AND WHOLESALER PERMIT

I, hereby, make application to the Commissioner of Agriculture of the State of Tennessee for a permit to handle eggs in accordance with the provisions of TN Code Annotated Title 53-2-109, promulgated by the Commissioner of Agriculture. I, also, agree to consent to the Tennessee Department of Agriculture's right to enter in order to conduct an official inspection of said facility. I, further understand that failure to meet compliance with the provisions of the TN Code Annotated 53-2-109 could result in license suspension and/or have fines imposed.

Date of Completion of Candling Class: \_\_\_\_\_ N/A \_\_\_\_\_

NAME OF ESTABLISHMENT: \_\_\_\_\_

LOCATION ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_

ZIP CODE: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

CELL PHONE: \_\_\_\_\_ COUNTY: \_\_\_\_\_ CODE: \_\_\_\_\_

HOURS OF OPERATION: \_\_\_\_\_ DATE OF OPENING: \_\_\_\_\_

NAME OF OWNER: \_\_\_\_\_ PHONE NUMBER: \_\_\_\_\_

MAILING ADDRESS (IF DIFFERENT FROM LOCATION ADDRESS): \_\_\_\_\_

CITY: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

Permit Fee

Processor & Wholesaler	53-2-109	\$ 50.00
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All persons making application for an egg permit shall furnish with the application sufficient records or information of the previous year's transactions of eggs to establish a basis for issuance of permit for which application has been filed.

Persons failing to submit the above information will be required to make affidavit as to the number of cases of eggs they handled the previous year.

Plants having a US bonded grader shall be considered eligible for a Tennessee Egg permit.

Persons out of state trading and trafficking in eggs in Tennessee are subject to the provisions as prescribed in the Tennessee Egg law.

**This form must be signed by an Owner, Partner or Operator of the establishment requesting the permit.**

SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_