



Gary W. Black
Commissioner

Georgia Department of Agriculture
Capital Square Atlanta, Georgia 30334-4201
poultry-licensing@agr.georgia.gov
404-656-3665

APPLICATION FOR LICENSE TO OPERATE A RENDERING PLANT

Date of Application:	
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Name of Applicant (Individual, Partners or Company Name)

(Area Code) Telephone	(Area Code) Fax Number	E-Mail Address

Type of Application:	New	<input type="checkbox"/>	Renewal	<input type="checkbox"/>
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If New Facility, submit three (3) sets of plans (blueprints) and three (3) sets of specifications of plants.	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
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Does this facility receive products from out-of-state facilities to be rendered?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
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Form of Organization:	
Individual	<input type="checkbox"/>
Corporation	<input type="checkbox"/>
Partnership	<input type="checkbox"/>
Other (Specify)	<input type="checkbox"/>

Location of Plant (include zip code and county)

Mailing Address (include zip code and county)

I hereby make application for a \$5.00 Rendering Plant License. (License expires December 31 of each year). I agree to abide by all rules and regulations of the Georgia Department of Agriculture and cooperate fully with the inspection personnel. Please send check or money order made payable to the Georgia Department of Agriculture to the following address: Georgia Department of Agriculture, Livestock/Poultry Field Forces, Room 112, 19 Martin Luther King Jr., Dr., SW Atlanta, Georgia 30334.

I CERTIFY THAT ALL STATEMENTS MADE HEREIN ARE TRUE TO THE BEST OF MY KNOWLEDGE AND BELIEF.

Typed Name of Person Signing This Application	SIGNATURE	TITLE
_____	_____	_____