



**CALIFORNIA OLIVE COMMITTEE
GROWER IDENTIFICATION NUMBER (GIN) APPLICATION
FOR THE 20__ - __ FISCAL YEAR**

Date: _____

I hereby apply for a Grower Identification Number (GIN) for the 2013-14 Fiscal Year, and certify that I am, and/or expect to be, a producer of conventional ripe olives during the 2013-14 Fiscal Year.

I hereby certify that the properties listed on this form are a true and complete list, to date, of all my properties upon which conventionally ripe olives are being produced under this GIN Name. If any additional properties are acquired by, or transferred to me, I will notify the California Olive Committee promptly, and request that such additional acreage be added to this list.

APPLICATION FOR GIN: _____**GIN Name:** _____

Additional delivery identification: _____
(Ranch/orchard number or name that may be used to identify these olives)

Bell Carter Foods Grower Number: _____ *Musco Olive Company Grower Number:* _____

Grower/Applicant Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____ Email Address: _____

I want to receive inspection certificates via: (indicate one)

Email _____ *Website* _____ *Regular Mail* _____ *Pick up at Plant* _____ *Fax* _____

FARM MANAGEMENT

Name of the entity, (other than above) engaged in farming or providing farm management of your property.

Farm Management Name or Contact Person: _____
(Type or Print)

Should they have access to inspection certificates identified with this GIN Name? Yes _____ No _____

Phone Number: _____ Email Address: _____

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0581-0781. The time required to complete this information collection is estimated to average 20 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

The U.S. Department of Agriculture (USDA) prohibits discrimination in all its programs and activities on the basis of race, color, national origin, age, disability, and where applicable, sex, marital status, familial status, parental status, religion, sexual orientation, genetic information, political beliefs, reprisal, or because all or part of an individual's income is derived from any public assistance program (Not all prohibited bases apply to all programs.) Persons with disabilities who require alternative means for communication of program information (Braille, large print, audiotape, etc.) should contact USDA's TARGET Center at (202) 720-2600 (voice and TDD).

To file a complaint of discrimination, write to USDA, Director, Office of Civil Rights, 1400 Independence Avenue, S.W., Washington, D.C. 20250-9410, or call (800) 795-3272 (voice) or (202) 720-6382 (TDD). USDA is an equal opportunity provider and employer.