

BUYER REGISTRATION APPLICATION

Please print clearly		
Company Name		
Contact Name: _		
	Town:	
Province:	Postal Code:	
	Fax:	
Mobile phone:	Email:	
license (if you re	es who may handle animals within your business and will be covered quire additional space please attach list)	by this
	2	
	4	
5	6	
I am a Dr I am hereby applyir read the Registratic Registered Buyers a long as I am in good	over, Livestock Dealer or Cattle Buyer g for a Buyer Registration under section 5 of the PEICP Cattle Marketing Levies Order. In and Cattle Marketing Levies Order and I am agreeing to abide by the requirements for and levy remittances. I understand that this Buyer's Registration will be renewed each y standing with the Commodity Board. I am aware that I must forthwith notify the Comes to the information provided to the Commodity Board on this application.	or ear as
Print Name	Signature	
Date		