

“NYCA” NO. ISSUED: \_\_\_\_\_

SEASON: \_\_\_\_\_

NYS DEPARTMENT OF AGRICULTURE AND MARKETS  
DIVISION OF FOOD SAFETY AND INSPECTION  
10B AIRLINE DRIVE, ALBANY, NY 12235

FSI-485 front (REV. 10/06) pm4

STORAGE OWNER/OPERATOR

PACKER/REPACKER ONLY

**APPLICATION FOR A  
NEW YORK STATE  
CONTROLLED ATMOSPHERE  
REGISTRATION NUMBER**

I, the undersigned, as owner and/or operator of a controlled atmosphere type of refrigerated storage facility for apples or repacker of apples, hereby apply for a “NYCA” Registration Number in order to operate and conduct activities pursuant to the appropriate provisions of Article 12-A of the Agriculture and Markets Law.

Federal Employer  
Identification Number

Phone No.

If any of the information above is incorrect or missing please enter that information below.

|                        |       |                                         |     |                    |  |
|------------------------|-------|-----------------------------------------|-----|--------------------|--|
| OWNER:                 |       | TRADENAME:                              |     |                    |  |
| ADDRESS                | CITY: | STATE                                   | ZIP | PHONE<br>(       ) |  |
| SOCIAL SECURITY NUMBER |       | FEDERAL EMPLOYER IDENTIFICATION NUMBER: |     |                    |  |

\*REASON FOR NOT PROVIDING SOC. SE. NO. AND/OR FED. ID. NO.

STORAGE FACILITY USED ENTIRELY FOR:

COMMERCIAL BUSINESS

COMMERCIAL AND OWN GROWN

APPLICANTS OWN GROWN ONLY

NAME OF PERSON(S) CONDUCTING “OXYGEN ANALYSIS.” \_\_\_\_\_

ROOM LOCATION(S):

# OF ROOMS

|       |       |
|-------|-------|
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |

TOTAL BUSHEL CAPACITY: \_\_\_\_\_

TOTAL NO. OF “C.A.” ROOMS: \_\_\_\_\_

**AUTHORITY:**

**Section 156-dd of Article 12-A of the New York State Agriculture and Markets Law**

The information requested in this application is for the purpose of enabling the Department to determine whether to issue the requested “NYCA” Registration Number. The Commissioner of Agriculture and Markets may refuse to grant a registration request, may suspend, or, after a hearing, revoke or refuse to renew a registration for failure to observe, perform or carry out the provisions of the Agriculture and Markets Law, or , for any reason that, in the opinion of the Commissioner, is sufficient to show that the applicant is not entitled to Public Confidence for the operation of the business for which the registration was issued or application made for the renewal of the registration.

\*Disclosure of your federal social security number and federal employer identification number is mandatory and is authorized by Section 5 of the tax law. This information will enable the New York State Department of Taxation and Finance to identify those individuals and businesses that have been delinquent in filing tax returns or may have understated their tax liabilities and to identify those affected by the laws administered by the Commissioner of Taxation and Finance. Should you fail to provide all of the requested information, your application may not be processed.

**I have read the “CA” Rules and Regulations Summary printed on the reverse side of this application and fully understand them.**

Signature: \_\_\_\_\_ Title: \_\_\_\_\_ Date: \_\_\_\_\_