License Renewal Notice

Dear Licensee -

Enclosed is your Farm Products license renewal application and instructions for the period May 1, 2018 through April 30, 2019. Your completed application and payment of the Producers Security Fund fee are required to be filed by April 1, 2018.

The New York State Department of Agriculture and Markets has recently initiated a new licensing program which does not currently have the capability for online renewals.

Therefore, we ask that you do not attempt to apply for or renew a NYS Department of Agriculture and Markets license online using this licensing system, even if it appears that you are able to do so.

Please complete and return the enclosed application, together with payment of the Producers Security Fund Fee, by April 1, 2018, to the following address:

    NYS Department of Agriculture of Markets
    Division of Agricultural Development
    10B Airline Drive
    Albany, NY 12235

If you no longer meet the requirements for this license application, please complete the enclosed Non-Dealer Declaration.

If you have any questions, please call (518) 457-4383.

Best regards,

Mark McMullen
Manager, Agricultural Producers Security Program
Instructions for Completing the Application

1. Complete the application ONLY if your annual purchase volume exceeds $20,000 from New York producers. If your annual purchases/dealing of farm products from New York producers do not exceed $20,000, or you will not be purchasing or dealing in New York farm products, or if you buy farm products only for sale at retail to the ultimate consumer (does not include sales to industrial, institutional, commercial or agricultural users), complete and return the enclosed Non-Dealer Declaration.

2. Please complete all questions and sign at the end. Applications must be received by April 1. Incomplete applications will be returned.

3. Failure to renew may result in possible assessment of penalties or other enforcement action.

Written Payment Agreements

The law authorizes the use of written payment agreements if the dealer wishes to make payment to a producer more than 30 days after the product is sold by the producer and delivered to the dealer, or other person as the purchaser may designate, provided that in no event shall such period exceed 120 days from said date of delivery.

Please note, the length of your written agreement will increase your security requirement obligation because extended payment agreements increase the Security Fund’s exposure in the case of a default of payment. For example, if your calculated security requirement based on 30 days is $50,000 and you have a written payment agreement extending payment terms from 30 days to 120 days, the amount would be four times the 30 days amount of $50,000 or $200,000. If payment terms are 60 days, the amount would be twice the 30 days amount of $50,000 or $100,000.

Security Requirement: Bond or Letters of Credit

All applicants must file a bond or letter of credit in an amount determined by the Department unless they are notified by the Department that they are not required to do so. Applicants with a continual bond on file do not need to take any further action unless notified of an increase in the amount required.

Applicants with an Irrevocable Letter of Credit are required to file a new original using the enclosed form in the same amount as the current license period unless notified of an increase in the amount of required security (the security amount is located on the front left-hand side of the application under security type). The license period must read “May 1, 2018 through April 30, 2019 and expiring on April 30, 2020.” Please note that riders and/or amendments will not be accepted. Letter of credit forms other than the one enclosed are subject to approval by the Commissioner. After your renewal application is received and reviewed, you may be notified of an increase in security. For further information on the Agricultural Producers Security Program, please check the Department’s website at www.agriculture.ny.gov/programs/apsf.html.

If you have any questions or need assistance, please feel free to contact us at (518) 457-4383.
Non-Dealer Declaration

___ My annual purchases or dealings of farm products grown by New York producers that are sold wholesale to agricultural, commercial, industrial and institutional users will not exceed $20,000.

___ My purchases or dealings from New York producers are only for sale at retail to the ultimate consumer.

___ Effective May 1, 2018, I will not be purchasing or dealing in New York farm product (includes Commission Merchant, Broker and Processor).

______________________________  ________________________________
Name of Licensee (print)        Authorized Person and Title (print)

______________________________  _____________________________
Date                                  Signature

Name and address of succeeding business (if applicable)

Return this portion OR the completed application to the Department by April 1.
RENEWAL APPLICATION FOR FARM PRODUCTS DEALER LICENSE

New York State Department of Agriculture and Markets For the license period May 1, 2018 to April 30, 2019

Current License Expires: April 30, 2018

INSTRUCTIONS
- Read instructions first to ensure you are subject to the license and the application is completed properly.
- Complete this application only if your annual purchase volume exceeds $20,000 from New York producers.
- Applications must be submitted 30 days before the expiration of your current license.
- Complete all questions. Incomplete applications will be returned.
- Make check or money order payable to “Department of Agriculture and Markets” and mail to the address at the end of the form.

| (1) Legal Business Name (Sole Proprietor, Partnership, Corporation, Cooperative, LLC) | (1a) Phone No. |
| (1b) Fax No. | (1d) E-Mail: |
| (1c) Doing Business As (d/b/a): |
| (1e) Principal Place of Business: |
| Street: |
| City State Zip Code |
| (2) Mailing Address if different from above: |
| Street: |
| City State Zip Code |
| (3) Federal ID Number: | -OR- | Social Security Number: |
| (3a) Bank Name: |

| (4) Business Type: | Sole Proprietor | Partnership | Corporation | Cooperative | LLC |

(4a) Please list sole proprietor and all officers of a corporation or cooperative. If applicant is a partnership or LLC, list partners/members (attach list if necessary). If applicant is a non-public corporation, list shareholders (attach list if necessary).

<table>
<thead>
<tr>
<th>Name (Please Print)</th>
<th>Title</th>
<th>Home Address (Street &amp; No., City, State, Zip)</th>
<th>Social Security No.</th>
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</tbody>
</table>

(5) State incorporated? ____________________________

(5a) Is the applicant a foreign or out-of-state sole proprietor, partnership or corporation? .......................................................... ☐ Yes ☐ No

If yes, provide date of filing in New York State

(5b) If out-of-state, the applicant agrees to accept service of process by first class mail to the designated individual at this address which shall constitute good and proper service of process. Designated: __________________________ Address: __________________________

(6) Please list the names, addresses and telephone numbers for any branch locations, separate processing plants or agents where farm products are received or purchased from New York State producers (attach list if necessary): __________________________

| (7) Is the applicant a grape processor? | ☐ Yes ☐ No |
| (8) Is the applicant a New York producer that grows farm products? | ☐ Yes ☐ No |
(9) List all specific farm products that you deal in from New York producers.

(10) What is the applicant's dollar volume of farm product purchases (or dealings as a broker) from New York producers?
   a. Last Calendar Year (2017) $________________________
   b. Largest Month ______________________
   c. Largest Month Amt $________________________
   d. Expected This Year (2018) $________________________
   e. Largest Month ______________________
   f. Largest Month Amt $________________________

(11) If you are a broker, are you responsible for paying New York producers? □ Yes □ No

   If yes, what percentage of your annual dollar volume of dealings with NY producers reported in question 10a are you responsible for making payment on? ____________%.
   If no, attach a list of those who are responsible for payment including name, address and phone number.

(12) Does the applicant sell farm products at retail directly to consumers? (See instructions on retail exclusion) □ Yes □ No

   If yes, what percentage of the total annual dollar volume reported in question 10a is sold at retail? ____________%

Agricultural Producers Security Fund Fee - Use the annual dollar volume reported in question 10a together with the table below to determine the Producers Security Fund Fee due and enter that amount on line 13.

### AGRICULTURAL PRODUCERS SECURITY FUND FEE

<table>
<thead>
<tr>
<th>Annual Volume</th>
<th>Fee</th>
</tr>
</thead>
<tbody>
<tr>
<td>$5,000,000 - and over</td>
<td>$2,500</td>
</tr>
<tr>
<td>3,000,000 - 4,999,999</td>
<td>$1,750</td>
</tr>
<tr>
<td>1,000,000 - 2,999,999</td>
<td>$1,000</td>
</tr>
<tr>
<td>500,000 - 999,999</td>
<td>$750</td>
</tr>
<tr>
<td>300,000 - 499,999</td>
<td>$500</td>
</tr>
<tr>
<td>200,000 - 299,999</td>
<td>$300</td>
</tr>
<tr>
<td>20,000 - 49,999</td>
<td>$200</td>
</tr>
<tr>
<td>0 - 19,999</td>
<td>$0</td>
</tr>
</tbody>
</table>

MAKE CHECK PAYABLE TO: Department of Agriculture and Markets

(14) Select payment terms or methods used for farm products producers:

   □ COD □ 15 Days □ Payment within 30 Days □ 45 Days □ 60 Days □ 90 Days □ 120 Days □ Other

(15) Is the applicant in violation (i.e. past due) of the payment terms listed in question 14? □ Yes □ No

   If yes, please provide the producer's name, address, telephone number and the amount owed (attach list if necessary):

(16) If the applicant deals in livestock, is applicant registered and bonded under USDA Grain Inspection, Packers and Stockyards Administration (GIPSA or P&S)? □ Yes □ No □ N/A

(17) Financial information provided as of (date): _____________. All applicants must complete this section. If any amounts are zero, enter zero on the line. Applicants who report more than $1 million in annual purchases (questions 10a or 10d), must also submit their most recent audited Financial Statements, including the Balance Sheet, Income & Expense Statement and Statement of Cash Flows.

   Total Current Assets: $__________
   Total Current Liabilities: $__________
   Total Assets: $__________
   Total Equity: $__________

The following must be submitted together and sent to:

NYS Department of Agriculture and Markets
Division of Agricultural Development
10B Airline Drive
Albany, NY 12235

- Signed and dated application (Please review to ensure all questions have been answered). Incomplete applications will be returned.
- Payment to cover the Producers Security Fund Fee.
- Original new Irrevocable Letter of Credit (only those dealers who currently have one on file).

If you have any questions, please call (518) 457-4383.

The authority to request the information contained in this document is found in Section 16 of the NYS Agriculture and Markets Law and the specific section or sections of that Law which relate to the license which you seek.

Your application for license is subject to denial and/or revocation if, after a hearing, it is determined that this applicant, licensee, officer, director, partner or share/stockholder, has been convicted of, or has pled guilty to, a felony in any court of the United States or any State or territory thereof, with respect to an offense involving, Article 20 of New York State Agriculture and Markets Law.

“I understand that the statements made in this application will be accepted for all purposes as the equivalent of an affidavit and that any false statements made herein, in addition to being the possible basis for a revocation of any license issued as a result of this application, may be punishable as a misdemeanor under the provisions of section 210.45 of the Penal Law of the State of New York.”

Print: ____________________________ Signature: ____________________________ Title: ____________________________ Date: ____________________________
ISSUER’S ACKNOWLEDGMENT

STATE OF_____________________________________

(ss.:________________________________________)

COUNTY OF__________________________________

On this________ day of_____________________, 20__, before me personally came______________________________________________________, to me known, who, by me being duly sworn, did say: that he/she resides in________________________, that he/she is the__________________________ of the ________________________________, the corporation described in and which executed the foregoing Letter of Credit; that he/she knows the seal of said corporation; that the seal affixed to said instrument is such corporate seal; that it was so affixed by order of the board of directors of said corporation, and that he/she signed his/her name thereto by like order, and he/she, further by me being duly sworn, deposes and says that he/she has read the same.

____________________________________________
Notary Public

____________________________________________
County
One Time Credit Card Payment Authorization Form

Sign and complete this form to authorize the NYS Department of Agriculture and Markets to make a onetime debit to your credit card listed below. Please mail to the address below.

By signing this form you give us permission to debit your account for the amount indicated on or after the indicated date. This is permission for a single transaction only, and does not provide authorization for any additional unrelated debits or credits to your account.

Please complete the information below:

I, __________________________, authorize the NYS Department of Agriculture and Markets to charge my credit card account indicated below for $ __________. This payment is for a:

FARM PRODUCTS DEALER LICENSE

Billing Address ____________________________ Phone No ____________________________
City ____________________________ State ________ Zip ________

Email ____________________________

<table>
<thead>
<tr>
<th>Account Type:</th>
<th>Visa</th>
<th>MasterCard</th>
<th>AMEX</th>
<th>Discover</th>
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<tbody>
<tr>
<td>Cardholder Name</td>
<td>____________________________</td>
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</tr>
<tr>
<td>Account Number</td>
<td>____________________________</td>
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</tr>
<tr>
<td>Expiration Date</td>
<td>____________________________</td>
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<tr>
<td>CVV2 (3-digit number on back of Visa/MC, 4 digits on front of AMEX)</td>
<td>__________</td>
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</tr>
</tbody>
</table>

FOR OFFICE USE ONLY

License No. __________
Receipt No. __________
Validation No. __________

SIGNATURE ____________________________ DATE ____________________________

I authorize the NYS Department of Agriculture and Markets to charge the credit card indicated in this authorization form according to the terms outlined above. This payment authorization is for a Farm Products Dealer license, for the amount indicated above only, and is valid for one time use only. I certify that I am an authorized user of this credit card.