



Agricultural Commissioner
Edmund E. Williams

Chief Deputy
Korinne M. Bell



COUNTY FARM LABOR CONTRACT REGISTRATION

REGISTRATION EXPIRATION DATE 12/31/2021

CALENDAR YEAR 2021

LICENSE NUMBER	REGISTRATION NUMBER	REGISTRATION FEE RECEIVED \$75.00
CONTRACTOR'S BUSINESS NAME		TELEPHONE NUMBER
BUSINESS ADDRESS		
CITY	STATE CA	ZIP CODE
E-MAIL ADDRESS		

CONTRACTOR'S NAME	TELEPHONE NUMBER	
ADDRESS		
CITY	STATE CA	ZIP CODE
E-MAIL ADDRESS		

REGISTRATION CONDITIONS AND WORKERS SAFETY REVIEWED AND RECEIVED	<input type="checkbox"/> YES	<input type="checkbox"/> NO
I certify the above information is correct and that I have received the conditions for registration as a Farm Labor Contractor from the County Agricultural Commissioner listed above, and that I have also received information regarding my responsibilities to my employees in the area of Worker Safety		
FARM LABOR CONTRACTOR'S SIGNATURE	DATE SIGNED/REGISTERED	
AGRICULTURAL COMMISSIONER'S SIGNATURE	DATE SIGNED/REGISTERED	

ATTACH CARD COPY HERE

FOR OFFICE USE ONLY
By: _____

Check No: _____

Date Received: _____

Receipt No: _____