



IOWA DEPARTMENT OF
**AGRICULTURE &
LAND STEWARDSHIP**
Mike Naig, Secretary of Agriculture



Commercial Feed License Application

Iowa Code §198

EFFECTIVE 2 Years. July 1 Through June 30.
RENEWAL July 1 Each Odd-Numbered Year.
FEE \$20. License Fee is Not Prorated.

RETURN Signed Form, Labels & Fee to:
IDALS / Feed Bureau / License
Wallace Bldg / 502 E 9TH St
Des Moines IA 50319

An Iowa commercial feed license is required for a person who manufactures commercial feed in Iowa, whose name appears on the label of a commercial feed as guarantor, or who distributes a commercial feed into Iowa. *Distribute* means to offer for sale, sell, exchange, or barter of commercial feed from a site located in Iowa or from the internet.

Company	Check One <input type="checkbox"/> New Application <input type="checkbox"/> License Renewal of License No _____		
	<input type="checkbox"/> Ownership Change of Current Iowa-Licensed Company License No _____		Date of Transfer ____/____/____
	<input type="checkbox"/> Ownership and Name Change of Iowa-Licensed Company License No _____		Date of Transfer ____/____/____
	<input type="checkbox"/> License Cancellation of License No _____ Reason is <input type="checkbox"/> Out of Business <input type="checkbox"/> No Longer Manufactures Feed <input type="checkbox"/> Bankruptcy <input type="checkbox"/> Other. Explain _____		
	License Holder / Legal Name + Doing Business As (DBA)		Company Name of Mailing Address, if Different
	Physical Street Address (No PO Box)		Mailing Address
	Town / State / Zip Code + 4	Iowa County Name & Number	Town / State / Zip + 4

Only one contact is accepted in the database. It is the responsibility of the licensee to notify the bureau of changes in contact information. Failure to receive notifications of fees or enforcement from IDALS because of outdated contact information will not be an accepted justification. (Suggestion: Create a nonspecific email address to avoid interruption caused by personnel changes, i.e., regulatory@ourcompany.com.)

Contact	Contact Name	Job Title	Email
	Direct Phone + Ext <div style="text-align: right;">Cell <input type="checkbox"/> Landline <input type="checkbox"/></div>	Alternate Phone + Ext <div style="text-align: right;">Cell <input type="checkbox"/> Landline <input type="checkbox"/></div>	Fax (If No Fax Available, Please Write <i>None</i>)

Type of Facility	Check All That Apply		
	<input type="checkbox"/> Name Appears on the Label of a Commercial Feed as Guarantor. <input type="checkbox"/> Supplement Manufacturer (Iowa Has No Remedy Law)	<input type="checkbox"/> Feed Ingredient Manufacturer <input type="checkbox"/> Medicated Feed Manufacturer <input type="checkbox"/> Nonmedicated Feed Manufacturer <input type="checkbox"/> Pet Food & Specialty Pet Food Manufacturer	<input type="checkbox"/> Feed or Feed Ingredient Broker <input type="checkbox"/> Feed or Feed Ingredient Transporter <input type="checkbox"/> Retail Distributor of Feed or Supplements <input type="checkbox"/> Wholesale Distributor of Feed or Supplements
	<input type="checkbox"/> Do You Distribute Any Pet Food/Supplements and/or Specialty Pet Food/Supplements Under Your Label? Check One Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes, Check One..... Exclusively in Containers of 10 Pounds or Less <input type="checkbox"/> Exclusively in Containers Over 10 Pounds <input type="checkbox"/> Both <input type="checkbox"/>		

Iowa tonnage reports are filed January 1 and July 1 each year. Tonnage is paid on pet food and specialty pet food in package weight that exceeds 10 pounds and on all other commercial feed. Tonnage is paid on the net tons of commercial feed distributed in Iowa the previous six months. Tonnage rate is 12 cents per ton with a minimum payment of \$20.

Pet food or specialty pet food -- including supplements -- in package weight of 10 pounds or less have a registration fee of \$50 per product. New products may be registered anytime throughout the calendar year. Registration is paid on products 10 pounds and less that are *offered* for sale via internet or a physical location in Iowa. Registration renewal is January 1 of each calendar.

Penalty is the GREATER amount: 10 percent of total OR \$50. Penalty applies to tonnage reports postmarked February 16th and later or August 16th or later, as applicable. The late fee for pet food registration is applicable to products *renewed* and postmarked February 16th or later. Failure to pay tonnage and/or or registration fees for pet or specialty pet 10 pounds or less will result in immediate cancellation of the commercial feed license. Any commercial feed found in the state will be placed on Immediate Stop Sale & Removal Order.

NOTE The *minimum* tonnage fee is \$20 and paid twice a year. The license fee is \$20 for two years and paid every odd-numbered year.

Signature	On behalf the company herein, the undersigned certifies the information on this Iowa commercial feed license application is true and correct. I understand financial requirements must be met before the license is valid. I understand and acknowledge that the submission of incomplete or false information may result in the denial of authorization.			
	A signature is required on this application. If signatory is same as in CONTACT section, signature and date are the only information needed below.			
	Signature	Print Name	Job Title	Date
	Email	Direct Phone + Ext	Alternate Phone + Ext	Fax

Submissions not complete, not legible, and/or not signed will be returned.

The Iowa Department of Agriculture and Land Stewardship is an equal opportunity employer and provider.

Branch 001	Check One <input type="checkbox"/> New Ownership of Current IA Licensed Company License No _____ Date of Transfer ____/____/____ If Applicable <input type="checkbox"/> New Ownership & Name Change of Current IA Licensed Company License No _____ Date of Transfer ____/____/____ <input type="checkbox"/> License Cancellation of License No _____ Reason is <input type="checkbox"/> Out of Business <input type="checkbox"/> No Longer Manufactures Feed <input type="checkbox"/> Bankruptcy <input type="checkbox"/> Other. Explain _____		
	Physical Street Address (No PO Box)		Mailing Address
	Town / State / Zip Code + 4	Iowa County Name & Number	Town / State / Zip + 4
	Check All That Apply <input type="checkbox"/> Name Appears on the Label of a Commercial Feed as Guarantor. <input type="checkbox"/> Feed Ingredient Manufacturer <input type="checkbox"/> Feed or Feed Ingredient Broker <input type="checkbox"/> Supplement Manufacturer (Iowa Has No Remedy Law) <input type="checkbox"/> Medicated Feed Manufacturer <input type="checkbox"/> Feed or Feed Ingredient Transporter <input type="checkbox"/> Nonmedicated Feed Manufacturer <input type="checkbox"/> Retail Distributor of Feed or Supplements <input type="checkbox"/> Pet Food & Specialty Pet Food Manufacturer <input type="checkbox"/> Wholesale Distributor of Feed or Supplements		
	<input type="checkbox"/> Do You Distribute Any Pet Food or Supplements or Specialty Pet Food or Supplements Under Your Label? Check One Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes, Check One..... Exclusively in Containers of 10 Pounds or Less <input type="checkbox"/> Exclusively in Containers Over 10 Pounds <input type="checkbox"/> Both <input type="checkbox"/>		

Branch 002	Check One <input type="checkbox"/> New Ownership of Current IA Licensed Company License No _____ Date of Transfer ____/____/____ If Applicable <input type="checkbox"/> New Ownership & Name Change of Current IA Licensed Company License No _____ Date of Transfer ____/____/____ <input type="checkbox"/> License Cancellation of License No _____ Reason is <input type="checkbox"/> Out of Business <input type="checkbox"/> No Longer Manufactures Feed <input type="checkbox"/> Bankruptcy <input type="checkbox"/> Other. Explain _____		
	Physical Street Address (No PO Box)		Mailing Address
	Town / State / Zip Code + 4	Iowa County Name & Number	Town / State / Zip + 4
	Check All That Apply <input type="checkbox"/> Name Appears on the Label of a Commercial Feed as Guarantor. <input type="checkbox"/> Feed Ingredient Manufacturer <input type="checkbox"/> Feed or Feed Ingredient Broker <input type="checkbox"/> Supplement Manufacturer (Iowa Has No Remedy Law) <input type="checkbox"/> Medicated Feed Manufacturer <input type="checkbox"/> Feed or Feed Ingredient Transporter <input type="checkbox"/> Nonmedicated Feed Manufacturer <input type="checkbox"/> Retail Distributor of Feed or Supplements <input type="checkbox"/> Pet Food & Specialty Pet Food Manufacturer <input type="checkbox"/> Wholesale Distributor of Feed or Supplements		
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Branch 003	Check One <input type="checkbox"/> New Ownership of Current IA Licensed Company License No _____ Date of Transfer ____/____/____ If Applicable <input type="checkbox"/> New Ownership & Name Change of Current IA Licensed Company License No _____ Date of Transfer ____/____/____ <input type="checkbox"/> License Cancellation of License No _____ Reason is <input type="checkbox"/> Out of Business <input type="checkbox"/> No Longer Manufactures Feed <input type="checkbox"/> Bankruptcy <input type="checkbox"/> Other. Explain _____		
	Physical Street Address (No PO Box)		Mailing Address
	Town / State / Zip Code + 4	Iowa County Name & Number	Town / State / Zip + 4
	Check All That Apply <input type="checkbox"/> Name Appears on the Label of a Commercial Feed as Guarantor. <input type="checkbox"/> Feed Ingredient Manufacturer <input type="checkbox"/> Feed or Feed Ingredient Broker <input type="checkbox"/> Supplement Manufacturer (Iowa Has No Remedy Law) <input type="checkbox"/> Medicated Feed Manufacturer <input type="checkbox"/> Feed or Feed Ingredient Transporter <input type="checkbox"/> Nonmedicated Feed Manufacturer <input type="checkbox"/> Retail Distributor of Feed or Supplements <input type="checkbox"/> Pet Food & Specialty Pet Food Manufacturer <input type="checkbox"/> Wholesale Distributor of Feed or Supplements		
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