

COUNTY AGRICULTURAL COMMISSIONER  
**COUNTY FARM LABOR  
CONTRACTOR REGISTRATION**

COUNTY AGRICULTURAL COMMISSIONER ADDRESS  
Placer County Department Of Agriculture  
11477 E AVE  
Auburn, CA 95603

REGISTRATION EXPIRATION DATE

FLC LICENSE NUMBER	FLC CERTIFICATE OF REGISTRATION	REGISTRATION FEE RECEIVED
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CONTRACTOR'S BUSINESS NAME	TELEPHONE NUMBER
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BUSINESS ADDRESS

CITY	STATE	ZIP CODE
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CONTRACTOR'S NAME	TELEPHONE NUMBER
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*EMAIL*

AGRICULTURAL COMMISSIONER'S SIGNATURE:	REGISTRATION CONDITIONS AND WORKER SAFETY INFORMATION REVIEWED AND RECEIVED <input type="checkbox"/> YES <input type="checkbox"/> NO
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*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 SIGNATURE	DATE SIGNED/REGISTERED
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