CCC-28-1

U.S. DEPARTMENT OF AGRICULTURE

Commodity Credit Corporation

PPLICATION	FOR A	APPROVA	L OF \	WAREHO	USE
Sugar	Storag	ge Agreen	nent (S	SSA)	

LEAVE BLANK - CCC USE ONLY					
1. Approved Date (MM-DD-YYYY)	2. Agreement Number				
3. Warehouse Code Number	4. Master Code Number				

NOTE:

Α

The authority for collecting the following information is Pub. L. 107-171. This authority allows for the collection of information without prior OMB approval mandated by the Paperwork Reduction Act of 1995. The time required to complete this information collection is estimated to average 1 hour per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

The following statement is made in accordance with the Privacy Act of 1974 (5 USC 552a) and the Paperwork Reduction Act of 1995, as amended. The authority for requesting the following information is 15 U. S. C. 714 and regulations promulgated thereunder (7 CFR Parts 1403 and 1423). The information will be used to complete the terms of an agreement between the warehouse operator and CCC. Furnishing the requested information is voluntary, however, without it, eligibility to enter into an agreement with CCC cannot be determined. This information may be provided to other agencies, IRS, Department of Justice, or other State and Federal Law enforcement agencies, and in response to a court magistrate or administrative tribunal. The provisions of criminal and civil fraud statutes, including 18 USC 286, 287, 371, 651, 1001, 15 USC 714m; and 31 USC 3729, may be applicable to the information provided. RETURN THIS COMPLETED FORM TO THE KANSAS CITY

COMMODITY OFFICE, BULK COMMODITIES DIVISION, STORAGE CONTRACT BRANCH, STOP 8748, P.O. BOX 419205, KANSAS CITY, MO 64141-6205.					
The undersigned hereby applies for a Sugar Storage Agreement in order to be eligible to store sugar on behalf of CCC or requests					
amendment to the current applica	tion on file.				
5. Legal Name of Entity		6. Warehouse Location(s) (Town, County, State)			
7A. Name of Warehouse Manager or Superintendent		7B. Telephone Number (Include Area Code) 7C. Fax Number (IncludeArea Code)			
8A. Type of Warehouse License: Not licensed State U.S. Warehouse Act	8B. License Number	9. Type of Operating End Corporation/Coope General Partnershi	erative Ind	dividual/ Proprietorship her pecify)	
10A. Contact Mailing Address (Include	e Zip Code)	10B. Contact Person for	CCC :		
		10C. Telephone Number	(Include Area Code) :		
		10D. Fax Number (Include Area Code):			
11. Mailing Address for Loading Order		10E. E-mail:			
		12B. Telephone Number (Include Area Code): 12C. Fax Number (Include Area Code):			
13. Name, Title, and Address of (Include Zip Code):				
 Officers, if a Corporation or Cooperative Partners, if a Partnership Individual, if a Proprietorship All members of LLC, if a LLC 					
13A. NAME		3B. ITLE		13C. ADDRESS	

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14. Total Handling Capac	city Combining all Locatio	ns Per Normal Workday	(Report Weight in Hundredw	reight (Cwt.)):		
A. TYPE OF CONVEYANCE		B. UNLOAD (cwt)		C. LOAD OUT (cwt)		
Railroad Car						
Truck						
Barge						
Vessel						
15. Indicate Maximum Number of Rail Cars You are Willing to Handle in a 24-hour Workday on a Multiple-Car Basis for CCC by Location:						
A. LOCATION	B. RECEIVE	C. LOAD OUT	A. LOCATION	B. RECEIVE	C. LOAD OUT	
16. CERTIFICATION						
The applicant certifies that all statements made herein are true and correct and that the applicant will operate in accordance with the terms and provisions of the SSA. Form must be signed by an authorized individual, i.e., corporate officer, partner or proprietor. Manager cannot sign unless authorized by a resolution of the Board of Directors or Power of Attorney furnished by a partner or proprietor. 16A. Legal Name of Entity						
16B. By		16C.	Title		16D. Date (MM-DD-YYYY)	

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