

**REGULATORY CHANGE TEMPLATE A
(GRAIN WAREHOUSE, FISH FARM VEHICLE,
HMPC, ORGANIC BROKER, ORGANIC CERTIFIER)**

SECTION A

1. VERIFICATION INFORMATION

Enter your Full Legal Business Name, TDA Client Number, and TDA License Number.

Please provide ONLY the information that has changed.

SECTION B

1. APPLICANT INFORMATION

This information will be used to generate your license. Enter the full legal business name as it is registered. If applicable, also enter a Doing-Business-As (DBA) name.

SECTION C

1. RESPONSIBLE PERSON INSTRUCTIONS

Please list the full legal name (no aliases or nicknames) of the primary person responsible for the business, as indicated:

- For a corporation, limited liability company, or cooperative – the president or CEO
- For a limited or general partnership – the managing partner or general manager
- For a sole proprietorship – the owner’s full legal name
- For any other type of business – the general manager

2. RESPONSIBLE OFFICER, PARTNER, MANAGER, OR OWNER

Indicate name and title of person responsible for the business. Enter contact information. The Responsible Person will receive, through regular mail, a login ID and password. The Responsible Person will then be able to conduct business related to their license(s) online, including viewing their licenses, making changes to their company information, and renewing licenses.

The Responsible Person will receive correspondence from TDA, including licenses and other documents, **ONLY** if a separate Person to Contact becomes unavailable. Otherwise, the Responsible Person will not receive any correspondence or documentation from TDA.

NOTE: The Person to Contact, named by the business in Section C of this form, is the preferred signatory of this application. That person may be the Responsible Person.

3. RESPONSIBLE PERSON MAILING ADDRESS

The Texas Department of Agriculture (TDA) website login ID and password will be mailed to the responsible person at this address.

SECTION D

1. PERSON TO CONTACT FOR LICENSE-RELATED MATTERS

Enter the name of a designated person, along with that person's contact information, who can discuss and answer questions about license-related issues.

NOTE: The Person to Contact, named by the business, is the preferred signatory of this application. That person may be the Responsible Person.

All correspondence, licenses, and other documents will be sent to the Person to Contact at the email address listed below. Approximately 30 – 45 days in advance of the expiration date of the license/certificate, the contact employee will receive a renewal invoice via email that will include a login ID and password to access TDA's internet website. The contact employee will then be able to conduct business related to their assigned license(s) online, including viewing their licenses, making changes to their company information, and renewing their licenses. A business can appoint one contact person to manage online all of the company's licenses.

2. MAILING ADDRESS

Enter the address at which the Person to Contact receives general correspondence, where applicable.

SECTION E

1. FACILITY INFORMATION

Enter facility name.

2. PHYSICAL ADDRESS OF LOCATION OF LICENSEE, LICENSED ACTIVITIES or EQUIPMENT

Enter the actual physical street address of the licensee, licensed activities or the equipment, including directions to this location if the address is difficult to locate. Please do not enter a P.O. Box. This information will assist TDA inspectors in locating your business in the event that an inspection is needed.

SECTION F

1. NEW RESIDENT AGENT - Out-of-State APPLICANT Only

When changing your Resident Agent, check either the Texas Secretary of State or the "Other" box and enter the new Resident Agent's contact information.

SECTION G

1. SIGNATURE

After reading the summary, print and sign your name, and date the form. Your signature here indicates that you have read the summary and that you are aware of your responsibilities regarding the issuance of the requested license.