



BC CRANBERRY MARKETING COMMISSION APPLICATION FOR GROWER LICENSE

Name of Grower:	
Name of Company:	
Name of Registered Voter:	
Mailing Address:	
(if different from above)	
Telephone:	Cell:
Email:	-
Production Area (acres)	Replant Area (acres)
LIST ALL OWNERS, SHAREHOLDERS	S OR PARTNERS (please print full names)



PO Box 11045 RPO McCallum, Abbotsford, BC V2S 0E4 T: 778.242.0285 E: info@bccranberries.com

BC CRANBERRY MARKETING COMMISSION APPLICATION FOR GROWER LICENSE

I/We certify that all information given in this application is true, correct, and complete in every respect.

The holder(s) of this license is/are authorized to grow cranberries in British Columbia and to deliver those cranberries to an agency licensed by the BC Cranberry Marketing Commission.

I/We understand that this license, if issued, is conditional upon my/our continuing compliance with the British Columbia Cranberry Marketing Scheme and the British Columbia Cranberry Marketing Commission's (the "Commission") Orders, and Rules now or hereafter enacted, and may be revoked or cancelled by the Commission at any time should I/We fail to remain compliant.

I/We agree to pay any fees time by the Commission.	or levies to the Commission	n as may be determined from time to
(Date)	(Print Name)	(Signature)