



Application For A Milk Grader License

Indicate if:

New application

Requirements:

- **Bulk Milk Grader's Certification Course certificate or equivalent (attach a copy)**

Renewal

Requirements:

- **JPS* Refresher Grading session or equivalent (provide certificate)**

I (name) _____

of (Applicant's mailing address) _____

(Street)

(City, Province, Postal Code)

(Phone Number)

(Email)

hereby make an application for a Milk Grader License under the **Natural Products Act** and Regulations. The license is valid from **April 1st to March 31st** and must be applied for annually.

Name and address of employer:

This application must **be accompanied by the required fee of fifty dollars (\$50.00)** and returned prior to **February 1st annually**. (Please make cheque payable to the Minister of Finance).

_____ Date

_____ Signature

RETURN TO: N.B. Farm Products Commission
 P. O. Box 6000
 Fredericton, N.B. E3B 5H1
 Telephone: (506) 230-2109
 Email: fpc.cpf@gnb.ca