

Farm Labor Contractor Certificate of Exemption Application



Business Information

1. Application is: New Renewal NE #: _____ SSN/FEIN: _____

Business Name: _____ Phone #: _____

Address: _____ City: _____ State: _____ Zip: _____

2. Select type of ownership under which your business is operated:

Individual Partnership Limited Liability Company Cooperative Association Corporation

3. Person Completing application:

Name: _____ Job Title: _____

Phone: _____ Email: _____

4. List all individuals having financial interest in the business (attach additional sheet, if necessary):

Name: _____ Percent: _____ Full Address: _____

Name: _____ Percent: _____ Full Address: _____

5. Has any person listed in question 4 been convicted of any felony under state or federal law? Yes No

Name: _____ Date: _____ Place: _____

Type of Conviction: _____

6. Has any person listed in question 4 had a Farm Labor Contractor License or Certificate suspended, denied, or revoked by any state or by the U.S. Department of Labor? Yes No

Name: _____ Date: _____ Place: _____

Reason: _____

Notarization

State of: _____)

) s.s.

County of: _____)

I, _____ being duly sworn, deposes and says no person other than those mentioned in the foregoing application are financially interested in the business to be carried on under the Farm Labor Contractor Certificate of Exemption when issued. Applicant further affirms that he or she is fully aware of all applicable provisions of the Nebraska Farm Labor Contractors Act, Sections 48-1701 through 48-1714, and that the applicant has knowledge of the penalties that may be imposed for violations of these laws, and all statements made in this application are true and correct.

Signature of Applicant

On this ____ day of _____, 20____, _____ personally appeared before me, whose identity was proved on the basis of satisfactory evidence to be the person whose name is subscribed on the foregoing document, and acknowledged that [he/she] executed it. Witness my hand and official seal.

Notary Public

My commission expires: _____

Notary Seal