



# New Feed & Pet Food Registration Instructions

## **PLEASE READ BEFORE COMPLETEING THE REGISTRATION FORM.**

Please use the fillable PDF feature and type your information, do not hand write.

### **Firm Information**

**Do not enter outside registrant information in this section.**

- Exact information that is on the product label.
- If you do not use an outside registration company, please put all contact and mailing information in this section.
- If you are a registrant company do not place your info here

This form is to be used for all new commercial feed products.

All registrations expire April 30<sup>th</sup> of current registration year. No matter when the registration was approved.

### **Registrant Information**

- Company/Person other than the company listed on the product label (firm) that is responsible for registration.
- If this section is filled out all of the corresponding documents will go to this company/contact.

### **Manufacture Information**

- Company responsible for making the product. This section needs to be completed. No correspondence will be delivered to the manufacturer.

### **Correspondence Delivery Method**

Please check either Electronic or Mail for how you would like your correspondence delivered.

- We prefer that you check electronic that way your registrations will get to you faster.
- If nothing is checked everything will be delivered electronically.

### **Product List**

- Only list the products you want to register for the new registration year.
- **Do not use a browser to open the application.** Download and use the most current version of Adobe Acrobat.
- Product name **MUST** match the product name on the package/label.
- **If the Excel file will not open please email [registration.statechemist@maryland.gov](mailto:registration.statechemist@maryland.gov) to receive the Excel file.**
- **No other format will be accepted. Print out the spreadsheet and attach it to the application.**

### **Registration Fees**

Is per product/brand name not per product weight.

- \$50.00 per product

### **Submitted By & Signature**

- The person responsible for the Registration Form. **PLEASE SIGN THE REGISTRATION FORM**
- You may digitally sign or print once completed and then sign.

### **Product Labels (submitted for new products and when revisions are made)**

- **ALL** product labels and supporting data must be submitted electronically to [labels.statechemist@maryland.gov](mailto:labels.statechemist@maryland.gov).
- **No paper labels will be accepted.**
- Labels must reflect exactly what the consumer will see in the store graphics, wording, etc.
- **PDF format only** – the file name **must** match the product name exactly as it is listed on the product list.
  - Labels must be completely legible once opened. Best file to send is your label proof (High Resolution).

### **Submitting The Registration**

- **Print the registration form**
- **Print the Excel spreadsheet containing product list and attach it to the registration**
- **Check for registration fee made out to**
  - Maryland Department of Agriculture
- **Mail to:**
  - Maryland Department of Agriculture  
P.O. Box 17304  
Baltimore MD 21297-1304

### **Registration Questions**

Philip Davidson  
410-841-2721  
[philip.davidson@maryland.gov](mailto:philip.davidson@maryland.gov)

If the instructions are not followed the registration will be sent back denied.  
Your company could face  
a Stop Sale.



## Registration of New Commercial Feeds and Pet Foods

### MARYLAND DEPARTMENT OF AGRICULTURE



Application for registration is hereby made for the current registration year ending **April 30** for Commercial Feeds and Pet Foods. An electronic copy of the product labels must be submitted.

#### Firm Information: (exact information of the **company listed** on the product label)

Firm Name: \_\_\_\_\_

Address On Label: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Contact: \_\_\_\_\_ Title: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_ Website: \_\_\_\_\_

#### Registrant Information: (outside party submitting/completing this registration. All correspondence will be sent here if completed)

Company Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Contact: \_\_\_\_\_ Title: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_ Website: \_\_\_\_\_

#### Manufacture Information: (location of where product(s) are made)

Company Name: \_\_\_\_\_

Address: \_\_\_\_\_

Country: \_\_\_\_\_ Phone: \_\_\_\_\_

#### Correspondence Delivery Method

Please check one

**Electronic** to email address above

**Mail** to address above

#### Product List

Double click the paper clip and complete the Excel spreadsheet. **Attach a copy to the application.** Do not use google chrome. If Excel doesn't open please e-mail [registration.statechemist@maryland.gov](mailto:registration.statechemist@maryland.gov)



#### Registration Fees

	Quantity	Fee	Total Due	Please make checks payable to: Maryland Department of Agriculture
Products:		x \$50.00 =		

I hereby certify that all information on this form, accompanying documents, and product labels submitted are true, correct, and in compliance with applicable federal and state requirements in every respect.

\_\_\_\_\_  
Authorized Representative (please print)

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
Date

#### Office Use Only

This certifies that the annual registration fees have been paid on the above products and the registrant is entitled to sell these for a period beginning with the actual date of approval and **ending April 30** of the current registration year unless canceled.

Approved By: \_\_\_\_\_

Registrant #: \_\_\_\_\_

Company #: \_\_\_\_\_

Date: \_\_\_\_\_

Check #: \_\_\_\_\_ Amount: \$ \_\_\_\_\_