



**STATE OF MISSISSIPPI  
DEPARTMENT OF AGRICULTURE AND COMMERCE**

ANDY GIPSON  
COMMISSIONER

**RE: Mississippi Egg Retail Food Establishments**

**§ 69-1-18. Definitions; authority of commissioner to promulgate rules and regulations and to conduct sanitation inspections in retail food stores; licensing; penalties**

(3) Each retail food establishment, before engaging in business, shall obtain a license from the commissioner. Owners of more than one (1) retail food establishment must obtain a license for each establishment. A license fee of Ten Dollars (\$10.00) must be paid to the department before a license will be issued. Application for such license shall be made on forms prescribed and furnished by the commissioner. Licenses issued under this subsection by the commissioner shall expire on June 30 each year and application for renewals thereof shall be made annually before the expiration date. Licenses shall not be transferable and application must be made for a new license if there is any change in location or ownership of the business.

Applications should be completed and submitted along with the applicable fee of \$10.00 to:

Mississippi Department of Agriculture & Commerce  
Consumer Protection Division  
P.O. Box 1609  
Jackson, MS 39215-1609

If you have any additional questions, please contact the Consumer Protection Division at 601-359-1148.



Mississippi Department of Agriculture and Commerce

Consumer Protection Division

Henri Fuselier, Jr., Director

P O Box 1609 ~ Jackson, Mississippi 39215 ~ (601)359-1148 ~ Fax: (601)359-1175  
~ cp@mdac.ms.gov

ID No. \_\_\_\_\_

**APPLICATION FOR RETAIL FOOD SANITATION LICENSE - EGGS**

The undersigned applicant hereby applies for a license to engage in business as a Mobile Retail Food Establishment, as required by *Miss. Code Ann. §69-1-18*. This license is only valid for an egg producer with 500 or less laying hens or pullets who offers eggs from his/her own production for sale off the farm directly to consumers.

CHECK ONE: ( ) New ( ) Renewal

If Renewal, has there been a change of ownership since last retail food sanitation license? ( ) YES ( ) NO

“New” means you did not have a license with us *last* year; “Renewal” means you *did* have a license with us last year.

Full Name		
Physical Address:	City:	State: Zip:
Mailing Address if Different from above:	City:	State: Zip:
Telephone No.	E-mail Address, Fax Number:	County

1. Number of laying hens or pullets in my poultry operation. \_\_\_\_\_
2. National Poultry Improvement Plan (NPIP) Number. \_\_\_\_\_ (This number comes from the Board of Animal Health; 601-832-3351.)
3. Eggs, offered for sale, are from my own laying hens or pullets. Yes \_\_\_\_ No \_\_\_\_
4. Eggs, offered for sale, are only sold directly to end consumers. Yes \_\_\_\_ No \_\_\_\_
5. Location(s) where eggs will be offered for sale. \_\_\_\_\_  
\_\_\_\_\_

The undersigned applicant hereby certifies that all statements, information, or schedules attached hereto are true and correct and applicant will comply with the Mississippi Retail Food Sanitation Law and Regulations and allow access to the establishment for inspection by the regulatory agency during the food establishment’s hours of operation and other reasonable times.

This the \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_

**ATTENTION:**  
This completed application and a check or money order, in the amount of \$10.00 payable to the Mississippi Department of Agriculture and Commerce, should be mailed to the address indicated at the top of the front page of this application. Applications that are incomplete and/or the fee is not submitted will

\_\_\_\_\_  
Full name of applicant (Print Name)

\_\_\_\_\_  
Applicant’s Signature

**OFFICE USE**  
Check Number: \_\_\_\_\_  
Date Received: \_\_\_\_\_