

Check and complete the section below that applies to your company. Please PRINT. In the case of partnerships and corporations, all partners, principals and officers personal information must be shown. A principal is defined as one who holds an office in the corporation or is a board member or holds at least 5% interest in the company.

Name of Firm: _____	SFM Registration No. (Renewal only) _____
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() CORPORATION: Principals or Officers' Names & Titles

1. Name: _____ Title: _____
 Address: _____
 City: _____ State: _____ Zip: _____ Phone Number: ____/____/____
2. Name: _____ Title: _____
 Address: _____
 City: _____ State: _____ Zip: _____ Phone Number: ____/____/____
3. Name: _____ Title: _____
 Address: _____
 City: _____ State: _____ Zip: _____ Phone Number: ____/____/____

Add additional names on the back of this sheet of paper.

() PARTNERSHIP:

1. Name: _____ Title: _____
 Address: _____
 City: _____ State: _____ Zip: _____ Phone Number: ____/____/____
2. Name: _____ Title: _____
 Address: _____
 City: _____ State: _____ Zip: _____ Phone Number: ____/____/____

() INDIVIDUAL:

1. Name: _____ Title: _____
 Address: _____
 City: _____ State: _____ Zip: _____ Phone Number: ____/____/____

Name of Firm:	SFM Registration No. (Renewal only)
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CERTIFICATION

I certify and declare that all information contained in this application is true and correct and that I have read and understood its contents. I also understand that any willful omission or falsification of pertinent information required in this application is justification for the denial, suspension and/or revocation of my firm's registration.

**Signatures of all Owners, Partners, Officers and/or Principals are required.
PLEASE SIGN IN BLUE INK ONLY!**

- 1. _____ Date: _____
- 2. _____ Date: _____
- 3. _____ Date: _____
- 4. _____ Date: _____
- 5. _____ Date: _____
- 6. _____ Date: _____
- 7. _____ Date: _____
- 8. _____ Date: _____

Additional signatures can be made on back of this sheet of paper.