

**AMENDED LICENSE APPLICATION
 ARKANSAS GRAIN DEALER
 IN AND UNDER THE LAWS OF THE
 STATE OF ARKANSAS
 ACT 601 OF 2015**

Full Name of Company (Legal Name as shown on License)			License Number		
Address Grain Dealer's Main Office (Complete Address)			County		
Trade Name of Grain Dealer					
Location (Complete Address)				County	
Phone Number		Fax Number		Cell Phone Number	
Email Address					
List any new Arkansas grain buyers:					
Upon approval of this request to amend the current license, I (grain dealer) certify to the State Plant Board; if in the future, I (grain dealer) change the operational name of the facility, change the name of the grain dealer manager and/or owner, change in name of the officers if a corporation, or discontinue operations as an Arkansas Licensed Grain Dealer (*which requires a 30 day notice and close out audit), I (grain dealer) will immediately notify the State Plant Board.					
Printed Name of Grain Dealer:					
Date:		Signature of Grain Dealer:			
A. PLEASE RETURN APPLICATION TO:		Arkansas Department of Agriculture-Plant Industries Division Grain Warehouse Section 1 Natural Resources Drive Little Rock, AR 72205			
B. FILL OUT THE FOLLOWING IF APPLICABLE:					
Statutory Agent Business Name:				Statutory Agent Name	
SA-City		SA-State	SA-Zip	County of Statutory Agent	
Phone # of Statutory Agent		Cell # of Statutory Agent		Fax # of Statutory Agent	
E-Mail Address of Statutory Agent					