

ODAFF

Food Safety Division, Meat
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OKLAHOMA
**Agriculture, Food
and Forestry**

FSD-MIS 216 (April 2026)

**Application of Registration for
Distributors, Meat Brokers, and Public Warehousemen**

☐ New Applicant

☐ Renewal

Registration DCSW- _____

Business Name: _____

Location Address: _____
(include zip code) _____

Mailing Address: _____
(include zip code) _____

Business Phone (include area code): _____

Email Address: _____

Type of Business: ☐ Distributor ☐ Meat Broker ☐ Public Warehouse

Business is: ☐ Individual ☐ Partnership ☐ Corporation

List name and address of each partner or corporate officer.

1. _____

2. _____

3. _____

4. _____

Name of operator if different than owner. _____

I understand that my operations will be subject to compliance reviews as provided by Oklahoma Statutes.

I understand that the registration will expire on December 31st of each year.

I understand that I have to reapply/renew each year to continue with my registration.

.....
Signature

.....
Date

.....
Title

.....
Print Name