

# Michigan Department of Agriculture and Rural Development



P.O. BOX 30776  
 LANSING MI 48909-8276  
 Phone: 1-800-292-3939 Email: [mdard-clu@mdard.michigan.gov](mailto:mdard-clu@mdard.michigan.gov)

## GRAIN DEALER MERCHANDISER LICENSE APPLICATION

In Accordance with Act 141, Public Act of 1939, as amended.

Renewal     New Application     No Longer Needed

<b>STEP 1: ORGANIZATION INFORMATION</b>			
*Ownership Type: <input type="checkbox"/> Corporation <input type="checkbox"/> Limited Liability Co. <input type="checkbox"/> Partnership <input type="checkbox"/> Sole Proprietor <input type="checkbox"/> Joint Tenant <input type="checkbox"/> Individual			
*Ownership Name:			
**Federal Identification #:			
Email Address:			
*Mailing Address:			
*City:		*State:	
*Zip:		*Country:	
*Fiscal Year-End Month:		*Fiscal Year-End Day:	
<b>STEP 2: BUSINESS INFORMATION - <i>Enter location information of the licensed facility</i></b>			
*Business Name:			
*Address:			
*City:	*State:	*Zip:	*Country:
<b>STEP 3: CONTACT INFORMATION – <i>If Organization and Business location are outside of Michigan a Michigan Resident agent is required</i></b>			
*Primary Contact Name:		*Phone:	
Email:		Address:	
City:	State:	Zip:	Country:
Additional Contact Name:		Phone:	
Email:		Address:	
City:	State:	Zip:	Country:
<b>STEP 4: GRAIN DEALER FACILITY FEE (Non-Refundable) – <i>Make check/money orders payable to the State of Michigan</i></b>			
Total Bushel Capacity 400,001 and over - \$1070.00		<b>Hot Key (mdard use only): 1234</b>	

Office Use Only  
**1234**

\* All field(s) with an asterisk (\*) are required to be filled in.  
 \*\* Federal Identification # not required for Individual Ownership Types

# Michigan Department of Agriculture and Rural Development

<b>STEP 5: OWNERSHIP</b> - <i>List is the name(s) of owner(s) with at least 5% shares</i>	
Name:	Name:
Name:	Name:
Name:	Name:
<b>STEP 6: LICENSE DETAILS</b> - <i>Information below is based on current fiscal year</i>	
* Bushels Handled by MI Producers:	
<b>STEP 7: GRAIN TRANSACTION METHODS</b> (*Check all that Apply – At least 1 box is required to be checked)	
<input type="checkbox"/> Cash	<input type="checkbox"/> Forward or Basis Contracting
<input type="checkbox"/> Issuing Grain Bank Warehouse Receipts	<input type="checkbox"/> Issuing Price Later Agreements
<input type="checkbox"/> Selling Grain of my Own Production	<input type="checkbox"/> Open Storage
<input type="checkbox"/> Issuing Negotiable or Non-Negotiable Warehouse Receipts	<input type="checkbox"/> Other: _____
<b>STEP 8: ATTACHEMENTS</b> - <i>Copies of certified/audited year-end financial statement and insurance policy and bond documentation are required</i>	
<input type="checkbox"/> *Certified/Audited Year-End Financial Statement	<input type="checkbox"/> *Insurance Policy Documentation
<input type="checkbox"/> *Bond Documentation	
<p><b>I hereby agree to comply with the provisions of Act No. 141 of Public Acts of 1939, as amended, and the rules issued in accordance therewith, and further that the foregoing information is true and correct. I acknowledge that none of the event referred to in section 10 if the Grain Dealers Act have occurred with the past 5 years.</b></p> <p>_____</p> <p style="display: flex; justify-content: space-between;"><b>Signature of Official in Charge</b> <b>Date</b></p> <p>_____</p> <p style="display: flex; justify-content: space-between;"><b>Printed Name of Official in Charge</b> <b>Title</b></p>	

\* All field(s) with an asterisk (\*) are required to be filled in.

\*\* Federal Identification # not required for Individual Ownership Types