

Name

☐ OWNER ☐ GROWER ☐ SELLER:

## **CERTIFICATE OF OWNERSHIP/MOVEMENT OF AGRICULTURAL COMMODITIES**

**Quality Assurance Division / Commodities Branch** 

☐ BUYER

Name

☐ RECEIVER:

This certificate is required if you sell any amount of an agricultural product that is to be marketed for commercial purposes; or transport agricultural commodities with a weight greater than 200 pounds or with a value of \$100 or more.

Residence Street Address		Street Address		
City, State, Zip Code	-	City, State, Zip Code		
Phone No.	Transport Vehicle License No.	Phone No.		
Quantity	Product Description	on	Price/unit	Amount
<u> </u>		TOTAL	AMOUNT DUE	
ORIGIN OF PR	ODUCT(S) - Name of Farm C	wner and Physica	al Address (or	TMK):
The information	above is factual and correct t	to the best of my k	nowledge.	
Print Name (Seller)		Signature (Seller)		Date
Print Name (Buyer)		Signature (Buyer)		Date
Two copies of this	certificate must accompany the shrtificate. False information or fail			

provided in Chapter 145, Part II Hawaii Revised Statutes.



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WNER GROWER SELLER: BUYER RECEIVER:			
Name			
Street Address			
City, State, Zip Code			
Phone No.			
	Price/unit	Amount	
TOTAL A	MOUNT DUE		
ner and Physica	I Address (or	TMK):	
the best of my ki	nowledge.		
Signature (Seller) Da		Date	
Signature (Buver)		Date	
•	Signature (Seller) Signature (Buyer)	Signature (Seller)	

Two copies of this certificate must accompany the shipment and one copy is to be retained by the person completing the certificate. False information or failure to comply may result in criminal prosecution as provided in Chapter 145, Part II Hawaii Revised Statutes.