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-ARM LABOR CONTRACTOR REGISTRATION				2026 (expires: 12/31/2026)	
			chang	k here if contact information has ged. Please indicate changes on se side.	
New	Renewa	al *	THIS FORM MUST BE ACCOMPANIED BY	Y A \$75.00 FEE	
FARM LABOR CONTRACTOR'S BUSINESS NAME	ACTOR BUSINESS	INFORMATION	STATE ISSUED FLC LICENSE #	LICENSE EXP. DATE	
BUSINESS ADDRESS			US DEPARTMENT OF LABOR FARM CONTRACTOR REG. (If applicable)		
CITY	STATE CA	ZIP CODE	BUSINESS TELEPHONE NUMBER		
CONTRACTOR'S E-MAIL ADDRESS			FAX NUMBER		
FARM LABOR CONTRACTOR'S NAME	ACTOR INFORMAT	ION	CONTRACTOR'S TELEPHONE NUMBER	CONTRACTOR'S FAX NUMBER	
ONTRACTOR'S MAILING ADDRESS	(If different)	CITY	STATE	ZIP CODE	
**Cop		our form returned to you?	Mail E-mail Fax Available at EVERY Cre	ew Location.	
ARM LABOR CONTRACTOR SIGNATURE			DATE		
AUTHORIZED REPRESENTATIVE'S SIGNATURE FOR HA DANG, AGRICULTURAL COMMISSIONER			REGISTRATION DATE		

Public Disclosure

We strive to protect personally identifiable information by collecting only information necessary to deliver our services. All information that may be collected at this site becomes public record that may be subject to inspection and copying by the public, unless an exemption in law exists. In the event of a conflict between this Privacy Notice and any County ordinance or other law governing the County's disclosure of records, the County ordinance or other applicable law will control. Access and Correction of Personal Information

You can review any personal information we collect about you. You may recommend changes to your personal information you believe is in error by submitting a written request that credibly shows the error. If you believe that your personal information is being used for a purpose other than what was intended when submitted, you may contact us. In all cases, we will take reasonable steps to verify your identity before granting access or making corrections. See Contact Information section.