



Apply and pay online at https://udafdms.utah.gov/ *Mailing Address* 4315 South 2700 West TSOB South Bldg, Floor 2 Taylorsville, UT 84129-2128 Contact us

Email: udaf-bedding@utah.gov Phone: (801)982-2264

APPLICATION FOR QUILTED CLOTHING PERMIT

(1110) (Do not use this form for a renewal)

	Mailing Address	
	Phone Number	E-mail
2) If a Parent C	ompany or Facilitator (3rd party c	ompany) is handling your permits and future renewals, please complete belo
Parent Comp	any or Facilitator Name	
	Phone Number	
1 OUILTED CL	OTHING (gloves, boots, hats, coat	s, etc.) permit fee \$105.0
Federal RN or	-	<i>s, etc.)</i> permit ree \$ 105.0
Federal RN or	r WPL #	or WPL in the State of Utah, please list: Year
Federal RN or	r WPL #	
Federal RN or	r WPL #	or WPL in the State of Utah, please list: Year
Federal RN or If you have Signature	WPL #	or WPL in the State of Utah, please list: Year

MAKE CHECKS PAYABLE TO: UTAH DEPARTMENT OF AGRICULTURE AND FOOD (Do not send cash)

Reset Form

Checks from foreign companies must have U.S. bank encoding numbers along bottom of check.

FOR OFFICE USE ONLY				
Code:	License:	Federal RN or WPL #:		
Customer #:	Date:	Year:		