



VERIFICATION FORM FOR NEW MEXICO FRESH CHILE
Form must be submitted with each load and followed through to the point of sale

Date: _____

Registration No: _____

Valid: _____ to _____

Name of Contact(s): _____

Business Name: _____

Mailing Address: _____, City _____, State _____, Zip _____

Contact's Telephone #: _____ E-mail: _____

Fax #: _____

- Load Type: Red Chile _____ Green Chile _____ Jalapeno _____ Other (explain) _____

By signing this document, I verify the product I am selling/producing as New Mexico chile complies with all requirements set forth under the New Mexico Chile Advertising Act, Chapter 25, Article 11, Sections 1 through 5, New Mexico Statutes Annotated 1978 Compilation and follows the requirements set forth under NMAC 21.16.7, New Mexico Chile Labeling, provided is true and accurate.

Signature: _____

Date: _____

OPTIONAL USE

Buyer: _____

Bill of Lading #: _____

Weigh Ticket #: _____

Lot #: _____

