



NEW MEXICO CHILE ADVERTISING ACT VERIFICATION/REGISTRATION FORM
 Return this form completed and attach required documents for review.

Date: _____ PRODUCT TYPE: FRESH PROCESSED

Name of Contact(s): _____
 Mailing Address: _____, City _____, State _____, Zip _____
 Contact's Telephone #: _____ E-mail: _____

Business Name: _____
 Physical Location: _____, City _____, State _____, Zip _____
 Business Telephone #: _____ E-Mail _____
 Fax #: _____

- Is your company currently part of NMDA's New Mexico Grown with Tradition program? YES NO
- Is your company currently part of NMDA's New Mexico Taste the Tradition program? YES NO
- Is your company currently part of the New Mexico Chile Association? YES NO
- Is your company currently part of the New Mexico Certified True program? YES NO

TYPE OF COMPANY (Please mark all that apply):

____ Grower ____ Processor ____ Retailer ____ Distributor ____ Produce Vendor
 ____ Restaurant ____ Winery ____ Nursery ____ Other(specify) _____

PROCESSED SECTION

- Name and address of supplier/producer of your New Mexico chile: _____
- List your products and provide description (ex. Salsa, sauces, cheese, etc.)
 1. _____
 2. _____
 3. _____
 4. _____
 5. _____

Attach additional sheet if needed
- Submit label for each New Mexico chile product(s). *(required)*

FRESH SECTION

- Location of production/crop (physical address): _____
 City _____, State _____, Zip _____
- Production period: from _____ to _____; Type of chile: _____
- Comments: _____

Attach additional sheet with above information if needed

- List retail outlets supplied:

1. _____
2. _____
3. _____
4. _____
5. _____

Attach additional sheet if needed

A verification form for the “Fresh” product type is current for one year upon date of verification by the New Mexico Department of Agriculture. A new verification form for “Fresh” must be submitted after expiration. A verification form will be provided and must be submitted with each load and followed through to the point of sale.

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: _____

SUBMIT BY

Mail: New Mexico Department of Agriculture
Attn: New Mexico Chile Advertising Act
Division of Standards and Consumer Services
PO Box 30005/MSC 3170
Las Cruces, NM 88003

Fax: 575-646-2361
Email: nmchile@nmda.nmsu.edu

OFFICE USE ONLY

Date Received: _____ Label attached: Yes _____ No _____ (if applicable)

Date Verified: _____ Verifier: _____

Comments: _____
