

**IDAHO-EASTERN OREGON ONION COMMITTEE**

P.O. Box 909, PARMA, ID 83660

PHONE: 208-722-5111 FAX: 208-722-6582

**CERTIFICATE OF PRIVILEGE  
APPLICATION TO MAKE SPECIAL PURPOSE SHIPMENTS**

The Marketing order for onions requires that handlers desiring to make shipments outside the production area to canners, dehydrators, extractors, freezers, and/or pickers, which do not meet the requirements for fresh shipments, shall prior to making such a shipment apply to the Idaho-Eastern Oregon Onion Committee (Committee) for permission. A shipment may be made to a receiver without a COP Permit number, if the sale occurs after 5 pm, on a holiday, or weekend; provided, that both the handler and receiver have had prior approval and this Application is faxed to the Committee prior to shipment.

|                        |                                                                                                                                                                               |  |  |       |            |     |  |
|------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|-------|------------|-----|--|
| Receiver & Agent       |                                                                                                                                                                               |  |  |       | Phone      |     |  |
| Contact Person(s)      |                                                                                                                                                                               |  |  |       |            |     |  |
| Address                |                                                                                                                                                                               |  |  |       |            |     |  |
| City                   |                                                                                                                                                                               |  |  | State |            | Zip |  |
| Purpose of Shipment(s) | <input type="checkbox"/> Canning <input type="checkbox"/> Dehydration <input type="checkbox"/> Extracting <input type="checkbox"/> Freezing <input type="checkbox"/> Pickling |  |  |       |            |     |  |
| Type of Sale           | <input type="checkbox"/> Spot Sale <input type="checkbox"/> Contract Sale                                                                                                     |  |  |       | Total cwt. |     |  |
| Shipment Date(s)       |                                                                                                                                                                               |  |  |       |            |     |  |
| Container(s)           | <input type="checkbox"/> 50 lb bags <input type="checkbox"/> Totes <input type="checkbox"/> Bins <input type="checkbox"/> Bulk <input type="checkbox"/> Other:                |  |  |       |            |     |  |

I, the undersigned, hereby certify to USDA and to the Committee, that I have read, fully understand, and agree to comply with 7 CFR § 958.328 which governs the handling of onions, and further agree that none of these special purpose onions will be diverted to any fresh market outlet(s). To the best of my knowledge all statements in this Application are true and complete. In addition, I will prepare an Onion Diversion Report for each Application and submit it to the Committee. The Committee reserves the right to audit the receiver or their agent randomly to verify shipments. Falsification of information on this government document may result in a fine, imprisonment, or both (18 U.S.C. 1001).

|           |  |  |  |       |        |     |  |
|-----------|--|--|--|-------|--------|-----|--|
| Signature |  |  |  | Name  |        |     |  |
| Title     |  |  |  | Date  |        |     |  |
| Firm      |  |  |  |       | Phone: |     |  |
| Address   |  |  |  |       |        |     |  |
| City      |  |  |  | State |        | Zip |  |

**COMMITTEE ACTION**

☐ APPROVED   ☐ NOT APPROVED   Reason not approved: \_\_\_\_\_

COP Permit No. \_\_\_\_\_ Date Approved: \_\_\_\_\_ Manager: \_\_\_\_\_

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0581-0178. The time required to complete this information collection is estimated to average 8 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

The U.S. Department of Agriculture (USDA) prohibits discrimination in all its programs and activities on the basis of race, color, national origin, age, disability, and where applicable, sex, marital status, familial status, parental status, religion, sexual orientation, genetic information, political beliefs, reprisal, or because all or part of an individual's income is derived from any public assistance program (Not all prohibited bases apply to all programs.) Persons with disabilities who require alternative means for communication of program information (Braille, large print, audiotape, etc.) should contact USDA's TARGET Center at (202) 720-2600 (voice and TDD).

To file a complaint of discrimination, write to USDA, Director, Office of Civil Rights, 1400 Independence Avenue, S.W., Washington, D.C. 20250-9410, or call (800) 795-3272 (voice) or (202) 720-6382 (TDD). USDA is an equal opportunity provider and employer.

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P.O. BOX 909, PARMA, ID 83660

PHONE: 208-772-5111 FAX: 208-722-6582

**IDAHO-EASTERN OREGON ONION DIVERSION REPORT**

This form is to be completed for each Certificate of Privilege permit number. This form is due within 72 hours of daily shipment(s) for spot sale onions and/or onions sold in 50 lb. bags; otherwise this form is due by 4 pm on the Wednesday immediately following the shipping week of Monday through Sunday.

|                       |  |       |                     |     |  |
|-----------------------|--|-------|---------------------|-----|--|
| COP Permit No.        |  |       | Date of Shipment(s) |     |  |
| Receiver Name & Agent |  |       |                     |     |  |
| Address               |  |       |                     |     |  |
| City                  |  | State |                     | Zip |  |

| R.R. Car No. or Truck Licenses            | Container & Label | Hundredweight (cwt.) Shipped |
|-------------------------------------------|-------------------|------------------------------|
|                                           |                   |                              |
|                                           |                   |                              |
|                                           |                   |                              |
|                                           |                   |                              |
|                                           |                   |                              |
|                                           |                   |                              |
|                                           |                   |                              |
|                                           |                   |                              |
|                                           |                   |                              |
| <b>TOTAL Hundredweight (cwt.) SHIPPED</b> |                   |                              |

I, the undersigned, hereby certify to USDA and to the Idaho-Eastern Oregon Onion Committee (Committee) that this report represents all onions for this COP Permit Number that were diverted from fresh channels in accordance with the regulations of the Committee (7 C.F.R. 958.328) for the stated date of shipment. Falsification of information on this government document may result in a fine or imprisonment, or both (18 U.S.C. 1001).

|           |  |       |       |          |  |
|-----------|--|-------|-------|----------|--|
| Signature |  | Name  |       |          |  |
| Title     |  | Date  |       |          |  |
| Firm      |  |       | Phone |          |  |
| Address   |  |       |       |          |  |
| City      |  | State |       | Zip Code |  |

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0581-0178. The time required to complete this information collection is estimated to average 8 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

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**SPECIAL PURPOSE SHIPMENT RECEIVER CERTIFICATION**

If you plan to purchase onions grown in the Idaho-Eastern Oregon production area that do not meet fresh market requirements as stated in 7 CFR § 958.328, and intend them for canning, dehydrating, extracting, freezing, and/or pickling, you must complete and submit this Certificate to the Idaho-Eastern Oregon Onion Committee (Committee). No shipment of onions for canning, dehydrating, extracting, freezing, and/or pickling may be received from the Idaho-Eastern Oregon production areas unless this form is completed and returned.

**CERTIFICATION STATEMENT:**

I, the undersigned, hereby certify to USDA and to the Committee that all onions received at the address below from the Idaho-Eastern Oregon production area will be used for (*check all that apply*):

☐ Canning    ☐ Dehydrating    ☐ Extracting    ☐ Freezing    ☐ Pickling

I, further certify that none of these onions will be diverted to any fresh market outlet(s). In addition, I agree to submit such documents and reports to the Committee that may be requested for its auditing purposes. Falsification of information on this government document may result in a fine or imprisonment, or both (18 U.S.C. 1001).

|           |  |       |      |          |  |
|-----------|--|-------|------|----------|--|
| Signature |  |       | Name |          |  |
| Title     |  |       | Date |          |  |
| Processor |  |       |      | Phone    |  |
| Address   |  |       |      |          |  |
| City      |  | State |      | Zip Code |  |

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0581-0178. The time required to complete this information collection is estimated to average 2 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

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