Please return completed form to:
Washington State Department of Agriculture
Commodity Inspection Division
21 North First Avenue, Suite 226
Yakima, WA 98902 or FAX (509) 575-2537

_____
Shipper Number
(Refer to this on all correspondence)

Request for On-Line Read Only Access to the Certificate of Compliance and Permits Program - C2P2

Check One: ☐ New Request ☐ Renewal Request ☐ Add/Remove Access

District: ☐ Yakima ☐ Wenatchee

Firm Name:	**Email Address:**
Mailing Address:	**Phone Number:**
City, State, Zip:	**Fax Number:**

Please list all names of all personnel authorized to access C2P2. After that, only add new names. All names on file will remain effective until the expiration date or until you notify WSDA (using this form) that they should be removed.

The person assigned the role of Shipper Master User should be someone with a vested interest in protecting the quality of operations at their business and in a position that has little turnover. ***Only a Shipper Master User can add and remove employees authorized to access C2P2****.*

Print Name & Title of Shipper Master User **Signature of Shipper Master User**

Personnel Authorized To Access C2P2:

NAME (s) *Please print clearly*	SIGNATURE (s)

Names to be removed:

NAME (s) TYPED	NAME (s) TYPED

Please return completed and signed request to the address at the top of this form. Keep a copy for your records.