

STATE OF NEW JERSEY  
DEPARTMENT OF AGRICULTURE  
DIVISION OF MARKETING AND DEVELOPMENT  
P. O. BOX 332  
TRENTON, NEW JERSEY 08625 0332  
(609) 292 5646  
(609) 984 2508 fax  
[www.nj.gov/agriculture](http://www.nj.gov/agriculture)

REQUEST FOR ASSISTANCE

Name of Requestor: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Phone No: \_\_\_\_\_ Fax No: \_\_\_\_\_ E-Mail Address: \_\_\_\_\_

Alleged Violation: (check all that apply)

- False & Misleading Advertisement  
(attach copy or describe ad)
- Sales Below Variable Cost  
selling price \_\_\_\_\_ unit \_\_\_\_\_
- Unlicensed Account
- Other \_\_\_\_\_

Name of Account: \_\_\_\_\_ ID Number: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone No: \_\_\_\_\_ Fax No: \_\_\_\_\_

- Failure to Pay Indebtedness

Balance Due: \_\_\_\_\_ as of \_\_\_\_\_  
(to include only milk and milk products)

Date of Last Delivery: \_\_\_\_\_  
(attach copy of last and/or outstanding invoices)

New Supplier: \_\_\_\_\_

Collection Attempts Made: \_\_\_\_\_  
(attach additional sheets if necessary)

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date