



ABN 84 816 063 155
PO Box 151 Curtin ACT 2605
www.sfmca.com.au

Application Form for the Use of the FeedSafe Logo and Product Distribution

The Executive Officer
SFMCA
PO Box 151
CURTIN ACT 2605
Email: contact@sfmca.com.au

Dear Sir,

I hereby apply to be a registered distributor of FeedSafe labelled products.

Rules of Distribution:

- we will keep records to enable full product recall,
- we will meet the FeedSafe style guide,
- have the Manufacturer's name and contact details on the bag,
- all FeedSafe products will be stored to maintain product integrity,
- we will update our product list with FeedSafe Management immediately upon adding a new product, and
- no production, including rebagging or relabelling, will be performed on FeedSafe products.

Company Details

Company ABN	
Company Name	
Address	
Postal Address	
Contact Person	
Contact Phone Number	

Product Details

Please list below the product names and manufacturer for each FeedSafe labelled product that is being distributed.

Product Name	Manufacturer



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Product Name	Manufacturer

We agree to meet the Rules of Distribution as listed on page 1.

Applicant:

Signature: Date:

Approval by FeedSafe Management

The above application has been approved commencing

Expiry*

FeedSafe
Management
Representative:

Signature: Date:

**Expiry will be maximum 3 years ending on 30 December or 30 June.*