



Maryland Department of Agriculture

Office of Marketing, Animal Industries and Consumer Services

Wes Moore, Governor
Aruna Miller, Lt. Governor
Kevin M. Atticks, Secretary
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Food Quality Assurance

Agriculture | Maryland's Leading Industry
mda.maryland.gov

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FSMA Produce Safety Rule Registration Form

TELEPHONE: (410) 841-5769

FAX: (410) 841-2750

EMAIL: produce.safety@maryland.gov

The Maryland Department of Agriculture (MDA) is registering farms and businesses located in the state that may be required to comply with the Food Safety Modernization Act (FSMA) Produce Safety Rule. Registration information is used to provide education, technical assistance and compliance information to regulated farms and businesses, exclude farms that are not required to comply with the rule, and prioritize inspections. Your information will not be shared with any entities or persons outside of MDA. Please return this form by mail, fax, or email as listed above even if you believe you are not subject to the Produce Safety Rule. Registration and exemption request forms are also available on our website.

Do you grow, harvest, and/or pack produce (fruits, vegetables, mushrooms, sprouts, peanuts, tree nuts, herbs)? Yes No
Do you grow, harvest, and/or pack produce that is covered by the FSMA Produce Safety Rule?\* Yes No

\*Covered produce is any produce, unless it is rarely consumed raw and is on the exhaustive list in the Produce Safety Rule § 112.2, as being non covered. If no, complete and submit the Non-Covered Commodities Exemption Registration Form.

What is the name of your farming operation, business, or corporation: \_\_\_\_\_

If applicable, what is your operation's trade name or DBA name: \_\_\_\_\_

Please enter the mailing address for your farming operation or business below.

Mailing Address Line 1: \_\_\_\_\_

Mailing Address Line 2: \_\_\_\_\_

Mailing City, State, Zip: \_\_\_\_\_

If it is different from your mailing address, please enter the address for your operation's physical location(s) below.

\*If you have multiple locations, please submit a complete list attached to the registration form.

Farm Address Line 1: \_\_\_\_\_

Farm Address Line 2: \_\_\_\_\_

Farm City, State, Zip: \_\_\_\_\_

Do you have gross sales of more than a three year average of \$30,509† in produce sales and less than a three year average of \$610,182† in total food sales?\* Yes No

\*If yes, your operation may be eligible for qualified exempt status. An application for Qualified Exempt is required to be submitted to MDA annually.

†Adjusted for inflation (Based on 2020, 2021, 2022) Inflation rate is updated April 1 each year at https://www.fda.gov/food/food-safety-modernization-act-fsma/fsma-inflation-adjusted-cut-offs

Please select a category for the previous three-year average gross produce sales from your operation:

Over \$500,000; \$250,000-\$500,000; \$30,509†-\$250,000; Less than \$30,509

Do you only grow produce that receives commercial processing to reduce pathogens\*? Yes No

\*Complete and submit the MDA Commercial Processing Exemption form.

Does your operation grow covered produce year-round? Yes No

If not, please provide the approximate start and end dates for your growing period: \_\_\_\_\_

What is the the name, information and role (owner, manager, etc) of the person in charge of your operation?

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Role: Owner; Manager; Food Safety Contact; Other (list): \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

Please list any crops that the farm will be growing in the space provided below: