



ADAM H. PUTNAM
COMMISSIONER

Florida Department of Agriculture and Consumer Services
Division of Fruit and Vegetables

APPLICATION FOR HAULER DATABASE

Phone (863) 297-3900 ▪ Fax (863) 297-3949

Make Check or Money
Order payable to FDACS
and remit \$50.00 to:

FDACS
500 3RD Street N.W.
Winter Haven, FL 33881

If you require further assistance, please contact the Technical Department at (863) 291-5820.

Date: _____ Hauler ID No (If Known): _____

Hauler Name: _____
(The name supplier's use for your company.)

Contact Person: _____

Mailing Address: _____

E-mail Address: _____

Telephone Number: _____

Fax Number: _____

Hauler ID and Password will be issued pending return of this request form and application fee.

(This section to be completed by FDACS and returned to you.)

To Log onto www.citranet.net, you will use the following information for your hauler account.

Hauler ID: _____

Password: _____