



2019 GROWER INFO ACCESS

Please fill out **one form for each grower entity** and fax or e-mail it back to us at least 7 days before you wish to access information from the grade stations. Thank you.

Grower Name: _____

Grower Address: _____

City, State, ZIP: _____

Contact Person: _____

Phone #: _____ Fax #: _____

E-Mail Address: _____

Please check here if you are a CTGA member

I want PTAB to send my grower code and password to the above address or fax number (**PTAB will assign your 2019 password**).

Print Name of Grower Representative

Signature of Grower Representative

Date

If you have had problems in the past with multiple grower numbers or any other issues, please call us at (530) 759-7501 as soon as possible so we can try to solve the problem before the season starts. Please fax to **(530) 750-1072** or email to connie@ptab.org.

PTAB will fill in the following and fax the information back to you:

Grower Code: _____

Password: _____

(Passwords are two lower-case letters (no space) –followed by four numbers)