**INSTRUCTIONS FOR Security authority for FDP**

**processing Co-OP coordinators FORM (FND-139)**

**IMPORTANT**: Users must log in to TX-UNPS every 120 days or their account will be deactivated. If a user’s account is deactivated, a new form must be submitted to TDA.

# SECTION A

## 1. COMPANY INFORMATION

1. Legal Name of Cooperative – Enter the full legal name of the cooperative.
2. Legal Name of Organization Representing the Cooperative – Enter the full legal name of the organization that is acting as a representative for the cooperative. If none, leave blank.

# SECTION B

## 1. CONTRACTING ENTITY INFORMATION / SECURITY GROUP

1. Legal Name of Contracting Entity – Enter the full legal name of the contracting entity.
2. CE ID – Enter the contracting entity 5-digit identification number.
3. FDP Co-Op – This is the applicable security group and should remain checked.
4. Associated Processing Co-Op – Enter the processing cooperative name. If unknown, leave blank.

# SECTION C

## 1. USER INFORMATION

Each user must review the acknowledgement statement and agree to the information when signing the user section. Each user information must be within each section. A continuation page is available if needed.

## 2. COMPLETE EACH SECTION FOR EACH USER

Check the appropriate box to indicate what action is being performed on the user.

* Add New User – This action is to add a new user account and provide a new User ID.
* Modify Existing User – This action is to modify user information to an existing user account.
* Removal – This action is to remove an existing user account completely from TX-UNPS.

1. Full Legal Name – Enter the full legal first, middle initial, and last name of the user. Do not enter a nickname.
2. Title – Enter the title of the user.
3. Business E-mail (Login information will be emailed to this address.) – Enter the business email address for the user. Email should be that of the user and not a shared email address as login information will be sent.
4. Business Phone – Enter the business telephone number for the user. Include the extension if applicable.
5. TX-UNPS User ID (if modifying/removing an existing user) – Enter the TX-UNPS User ID for the user that is being modified or removed.
6. Sign Here / Date – Signature of the user and the date signed.

# SECTION D

## 1. CONTRACTING ENTITY APPROVAL SIGNATURE

1. Printed Full Name of Highest Official in the CE – Enter the full name of the contracting entities highest official such as the Superintendent, Chief Officer, Owner, etc. The name should not be a nickname.
2. Signature of Highest Official – The highest official identified must review the certification and sign and date to approve the request.

## SECTION E

## 1. TDA INTERNAL USE ONLY

This section is used by TDA Food & Nutrition Representatives only.

# MAIL, EMAIL or FAX Form

Once the form is completed, mail, email or fax the form to the following location:

Texas Department of Agriculture

P. O. Box 12847

Austin, TX 78711

Email: PES-FND101.Bops@TexasAgriculture.gov Fax No.: 888-203-6593