

# APPLICATION FOR A DAIRY FARM PERMIT

**4) For goats and sheep, proof the entire herd or flock has been tested for Brucellosis within the past twelve months.**

1.	GRADE OF MILK PRODUCED:	GRADE "A"			MANUFACTURED
2.	THIS PERMIT IS FOR (Please list one):	Cow	Goat	Sheep	Other: _____

3. **ISSUE PERMIT TO:** The permit may be issued to any individual(s), plant operator(s), partnership, corporation, company, firm, trustee, or institution. If a partnership, corporation, company, firm, trustee, or institution, the permit application must be accompanied by the articles of incorporation, partnership agreement, or trust document, identifying the names, titles, and addresses of all responsible officials for the entity.  
No permits may be issued to minors (persons under 18 years of age).

4. **PERMIT ADDRESS:** The actual location of the dairy farm should be listed. Please list the UPS delivery address. (Please Print)

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

5. **TRADING AS NAME:** If the dairy farm will not be trading in the name to which the permit is issued, list the trading as name (name of farm or other name). (Please Print)

6. **CORRESPONDENCE NAME AND ADDRESS:** Please designate the name of one permit holder and their mailing address to whom all milk sample reports and official correspondence may be sent. (Please Print)

Correspondence Name: \_\_\_\_\_

Address:

City/State/Zip: \_\_\_\_\_

7. **MILK MARKETING COOPERATIVE OR NAME AND ADDRESS OF MILK BUYER:** If independent, write "independent". (Please Print)

8. **NAME(S) AND PHONE NUMBER(S) OF RESPONSIBLE PERSON(S) TO CONTACT:** (Please Print)

Name

Phone Number

Name \_\_\_\_\_

Phone Number

E mail:

9. **DAIRY FARM OWNER'S NAME, ADDRESS, AND PHONE NUMBER:** (Please Print)

Owner's Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

10. **SIGNATURE(S) OF PERSON(S) TO WHOM PERMIT IS TO BE ISSUED:** All persons listed on the permit must sign and date below.

Name	Signature	Title	Date
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Name	Signature	Title	Date
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Name	Signature	Title	Date
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Name	Signature	Title	Date
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**OFFICE INFORMATION, TO BE COMPLETED BY THE INSPECTOR:**

**FARM INSPECTOR:**\_\_\_\_\_ **FARM INSPECTOR NUMBER:**\_\_\_\_\_

PRODUCER PATRON NUMBER: \_\_\_\_\_ TANK ID NUMBER(S): \_\_\_\_\_ COOP BTU \_\_\_\_\_

FARM IS LOCATED IN THE COUNTY/INDEPENDENT CITY OF: \_\_\_\_\_

**IS PLANT LOCATED WITHIN 50 MILES OF:**

**NORTH ANNA NUCLEAR POWER PLANT?**

**SURRY NUCLEAR POWER PLANT?**

**NORFOLK NAVAL NUCLEAR POWER STATION?**

**WATER SOURCE:** PUBLIC – No water sample necessary  
PRIVATE – Negative water supply test within 30 days of permit issue date

**WASTE DISPOSAL:** PUBLIC – Letter of approval from county/city for business at this location to discharge waste into public system

**PRIVATE – Applicant was informed that the animal waste water discharge may be subject to DEQ and septage discharge to VDH regulations.**

**ISSUE DATE OF PERMIT:** \_\_\_\_\_ **PERMIT NUMBER ASSIGNED:** \_\_\_\_\_

**SIGNATURE OF INSPECTOR:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

Attached documents:

# Water Sample Report

# Inspection Report

## Waste Disposal Approval

Other: \_\_\_\_\_