



# APPLICATION/CERTIFICATION FOR NEW DAIRY PERMIT

Food Safety and Consumer Protection

**Permit Type**

- Milk Distributor Permit – \$150
- Field Representative Permit – \$25

**Plant/BTU #** \_\_\_\_\_

<b>Applicant Information</b>	
Owner/Firm Name (Applicant)* _____	
Address _____	
City* _____	State* _____ Zip Code* _____
Phone #* _____	Cell Phone # _____
Type of Entity* _____	

<b>Owner Information</b>	
Owner/Firm Name (Owner)* _____	
Address _____	
City* _____	State* _____ Zip Code* _____
Phone # _____	Cell Phone # _____
Mail To _____	Notification _____

By virtue of this application, I do hereby grant permission to the Nebraska Department of Agriculture and its designated agents to have access to my dairy facilities for inspection purposes.

I understand that failure to comply with applicable laws, rules, and regulations will be cause for temporary suspension or revocation of my permit. I also understand that while said permit is suspended or revoked, it is unlawful for me to operate as a business for which said permit was granted.

I have read the above statement.\*

\_\_\_\_\_  
Applicant's Signature\*

\_\_\_\_\_  
Printed Name\*

\_\_\_\_\_  
Date\*

<b>FOR OFFICE USE ONLY</b>	
Permit # _____	Inspector ID # _____