



APPLICATION FOR BULK MILK HAULER / SAMPLER PERMIT

State Form 1242 (R6 / 4-18)

INDIANA STATE BOARD OF ANIMAL HEALTH DAIRY DIVISION

Discovery Hall
1202 East 38th Street, Suite 100
Indianapolis, IN 46205-2898
Telephone number: (317) 544-2400
Fax number: (317) 974-2011

Pursuant to the provisions of IC 15-18-1-3, the following is an application form for a bulk milk hauler / sampler permit.

Type of application <i>(Please check one.)</i> <input type="checkbox"/> New <input type="checkbox"/> Renewal		Bulk hauler permit number BH -	
Type of request <i>(Please check if applicable.)</i> <input type="checkbox"/> Field representative <input type="checkbox"/> In-line sampler approval requested <input type="checkbox"/> On farm sampler approval requested			
Name of applicant			
Address of applicant <i>(number and street, city, state, and ZIP code)</i>			
Telephone number <input type="checkbox"/> Cellular <input type="checkbox"/> Land ()		Fax number ()	E-mail address
Grade of milk hauled <input type="checkbox"/> Grade A <input type="checkbox"/> Manufacturing grade <input type="checkbox"/> Both			
Name of milk route owner			
Address of milk route owner <i>(number and street, city, state, and ZIP code)</i>			
Bulk Tank Unit (BTU) number(s)		Route number(s)	
Name of plant regularly hauled to			
Location of plant		County in which you pickup the majority of your stops	

I hereby apply for a Bulk Milk Hauler / Sampler Permit. I agree to comply with Indiana Rules and Regulations concerning Bulk Milk Collection and Sampling Operations in performing as a bulk milk hauler in the State of Indiana. This is to affirm under penalty of perjury that the above facts are true.

Signature of applicant

Date *(month, day, year)*