

Disclosure of Producer Practices: _____

MEAT PRODUCERS

(PRODUCER IDENTIFICATION, CO-OP USE ONLY)



5525 Airport Road
Nampa, ID 83687
(208) 850-3319
idahofreshfarms.org

Type of Animal(s): _____ **OTY:** _____

Approx. live weight: _____ **Approx Hanging/Dressed weight:** _____

Approx. lbs of packaged meat per animal: _____

Portions available for purchase: Whole Half Quarter Other: _____

Breed of Animal(s): _____

Age of Animal(s): _____ **Proposed Butcher Date:** _____

Type of Feed Provided to animals (check all that apply):

Pasture/forage (in season) Hay Type: _____ Pre-mixed Feed Type: _____

Approx. outdoor area available per animal: _____ Type: Pasture Dry (Feedlot)

Grain Amount: _____ Duration: _____ Type: _____ (e.g. corn, GMO or not)

Other supplements or feed: _____

Food/water availability: Always available # of feeding/watering times per day: _____

*Percentage of Feed that is certified organic: _____ (consider pasture, hay, grain, etc.)

Shots/Antibiotics/Drug Treatments: Please list any and all medications or drug treatments of any kind given to animal(s): _____

Farm/Facility: (photos may be included)

Size of Property (acres): _____ Location of Property (city): _____

Indoor areas provided for animals: Yes No

Flooring type: Concrete Sealed Wood Dirt Other: _____

Bedding type: Straw Shavings Sawdust Dirt Other: _____

Cleaning frequency (new bedding) for indoor shelter provided: _____

Butchering Facility: Transportation of animal to butcher will be provided as part of purchase price.

Cutting and wrapping charges and kill fees will be payable to the butcher directly per portion purchased.

Proposed butcher: _____ Location: _____

Estimated cost for butchering: \$ _____ per _____ (please indicate per lb or per portion)

Hanging time, if applicable: _____

Please list any practices not yet disclosed herein: _____

I certify that the information provided here is complete and accurate.

Producer signature or initials

Date