

Disclosure of Producer Practices:

RAW MILK PRODUCERS



Producer's ISDA Permit Number: _____

Animal Identification Numbers:

1. _____ 2. _____ 3. _____

Breed: _____ Breed: _____ Breed: _____

Additional registered animals: _____

Quantity and type of animals maintained by producer on premises:

(please indicate all animals, both those participating in co-op food production, and those kept for other purposes)

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

Pasture when in season *estimated pasture area per grazing animal: _____

Hay Type: _____ (alfalfa, grass, oat, etc.)

Grain Type: _____ (which grains, GMO or not)

Quantity of grain fed per day: _____

Other supplements or feed: _____

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

*Percentage of Feed that is not organic but grown with organic practices: _____

(This refers to pasture/hay that is not treated with chemical fertilizers or other sprays or treatments.)

Facilities: (photos may be included)

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

1) Milking area: Barn Other indoor facility Outdoor facility

Flooring type: Concrete Sealed Wood Dirt Other: _____

2) Milk processing area: Dedicated area Home kitchen area Other: _____

3) Stall, Loafing Shed, or other shelter provided? Yes No Type: _____

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

Milking Procedures: (check all that apply)

Animals are milked by hand Animals are milked by machine

Animals are milked by owner Animals are milked by hired help

Animals are milked by minors Frequency of milking: once daily twice daily

Method of sanitizing milking equipment (buckets, machines, etc.): _____

Please describe your milking practices (pre- and post-milking process included):

Milk Handling:

Time lapse from milk collection to bottling and straining: _____

Time lapse from straining to chilling: _____

Method of chilling milk: _____

Bottle and container cleaning procedures: _____

Cleaning Agent: Dishwasher w/detergent Bleach Solution *Ratio to water: _____

Other: _____

*Note: Milk is labeled with collection date and stored between 33-40° F until pick-up. 35-45° F.

Regular Cow Health Maintenance Provided:

Hoof Trimming 3-way or 7-way vaccines Other: _____

*Note: TB and Brucellosis tests are done regularly by the State on all registered animals

Please list any descriptions of practices not yet mentioned:

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

Producer signature or initials

Date