

2320 SOUTH DUPONT HIGHWAY Dover, Delaware 19901 AGRICULTURE.DELAWARE.GOV

TELEPHONE: (302) 698-4500 TOLL FREE: (800) 282-8685

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MEAT AND POULTRY INSPECTION LICENSE APPLICATION

Under 3 Del. C. § 8709, applicants must apply annually for a license to operate an official establishment or others engaged (a) in the business of slaughtering any livestock or poultry, or preparing freezing, packaging or labeling, buying or selling (as brokers, wholesalers or otherwise), transporting, or storing any livestock products or poultry products for use as human food; or (b) in business as renderers or in the business of buying, selling or transporting any dead, dying, disabled or diseased livestock or poultry or parts of the carcass of any such animals (including poultry) that died otherwise than by slaughter during the fiscal year ending June 30.

ORGANIZATION INFORMATION							
Organization/Plant Name:						USDA Est. #:	
Mailing Address:					Ph	ione:	
City:				State:	Zip Code:		
Physical Address (If different from above):							
Ci	ty:			State:	Ziį	o Code:	
NATURE OF BUSINESS							
Check all that may apply							
	Meat or Meat Products	☐ Poultry or Pou	ltry F	Products 🗆 Siluriforme	s Fis	h or Siluriformes Fish Products	
BUSINESS ACTIVITIES							
Cł	neck each type of business y	ou are engaged in.					
	Domestic Broker	☐ Import Broker		Renderer		Animal Food Manufacturer	
	Public Warehouseman	□ Wholesaler		Siluriformes Fish Farm/Pond		Siluriformes Fish Transporter	
	Buying, selling, transporting, or importing any dead, dying, disabled, or diseased amendable species or parts of the carcasses of any such amendable species that died otherwise than by slaughter. (4D operator)						
ADDITIONAL LOCATIONS							
In the space below, list the address(es), names and/or trade names (if different from your organization) of any subsidiaries, branches or divisions of your orginanization that participate in the same "Nature of Business" as indicated above. If this does not apply, check the "does not apply" box.							

AFF DICANT INFORMATION								
Name (Last, First, Middle):		Phone:						
Title:	_	Email:						
Mailing Address:								
City:	State:	Zip Code:						
Physical Address (If different):								
City:	State:	Zip Code:						
APPLICATION FEE								
The Meat and Poultry Inspection License Application has a NON-REFUNDABLE application fee of \$25 . This can be paid via check, money order or online at https://agriculture.delaware.gov/food-products-inspection. Checks or money orders should be addressed to "Delaware Department of Agriculture" .								
Completed applications should be emailed to meatinspection@delaware.gov OR mailed to Delaware Department of Agriculture, Food Products Inspection, 2320 S. DuPont Highway, Dover, DE 19901.								
Payment Method (choose one):	☐ Payment Enclosed ☐ ☐	Online Payment						
PROGRAM ACKNOWLEDGMENTS								
I,, hereby a with the provisions of 3 Del. C. § 8709, as amo		ion License to comply in accordance						

"This is an equal opportunity program. If you believe you were discriminated against because of race, color, national origin, sex, age, religion, or handicap, write immediately to the Secretary of Agriculture, or Administrator, FSIS, Washington, DC 20250."

Applicant's Signature:

Date: _____ / _____ / _____