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| F-fd-56.docx (New 9/19) |
|  | Wisconsin Department of Agriculture, Trade and Consumer Protection*Division of Food and Recreational Safety*PO Box 8911, Madison, WI 53708-8911Phone: (608) 224-4682 Fax (608) 224-4710 |
| REQUEST FOR INSTALLATION/MODIFICATION OF A BATCH PASTEURIZER |
|  | *Wis. Admin. Code § ATCP 65.60* |
| GENERAL INFORMATION: |
| DAIRY PLANT       | LICENSE NUMBER & DAIRY PLANT NUMBER      -D1 – 55-       | DATE OF INSTALLATION      |
| BUSINESS LOCATION STREET      | CITY      | STATE   | ZIPCODE      | COUNTY      | BUSINESS PHONE: (   )     -      |
| INSTALLER / MANUFACTURER      | PRODUCT / PROCESS      | CAPACITY      |
| INSTALLER CONTACT NAME      | CONTACT EMAIL ADDRESS      | CONTACT PHONE: (   )     -      |

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| **Please use the following resources to document and/or validate the Batch Pasteurizer complies with *Wis. Admin. Code § ATCP 65.60.***3-A Sanitary Standards and Accepted Practices <https://www.techstreet.com/3a/pages/home> * Non-Coil Type Batch Pasteurizers, Number 24-03
* Inlet and Outlet Leak-Protector Plug-Type Valves, Number 56-00
* Sanitary Fittings, Number 63-03
* Method of Producing Steam of Culinary Quality, Number 609-03
* Supplying Air Under Pressure for Contact with Product and Product Contact Surfaces, Number 604-05

Manufacture database by 3-A Sanitary Standard listing <http://www.3-a.org/3-A-Symbol/Search-Database-of-Current-Certificates>Applicable FDA Memorandum of Milk Ordinance Equipment Compliance (M-b) for accepted equipment <http://www.fda.gov/Food/GuidanceRegulation/GuidanceDocumentsRegulatoryInformation/Milk/ucm2007976.htm>2017 PMO * <https://www.fda.gov/media/115265/download> Refer to ITEM 16p.(A) BATCH PASTEURIZATION
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| **EQUIPMENT SPECIFICATIONS** – Provide the appropriate information as required below: |
| BATCH PASTEURIZER | MAKE:        | MODEL #:       | SERIAL #:       | 3-A 24-03 CertificationYES [ ]  Provide documentationNO [ ]  See Note Below |
| TEMPERATURE MONITORING  |
| INDICATING THERMOMETERS*(Product and Air Space)* | MIG Make:       | SERIAL #:       |
| ELECTRONIC Make:       | MODEL:       | [ ]  M-b       Provided |
| TEMPERATURE RECORDER | MAKE:        | MODEL:       | SERIAL #:       |
| ELECTRONIC COMBINATION THERMOMETER | MAKE:        | MODEL:       | [ ]  M-b       Provided |
| [ ]  M-b       Provided |
| ELECTRONIC RECORDKEEPING | YES [ ]  NO [ ]  | MAKE:        |
| SUPPLEMENTAL DOCUMENTATION PROVIDED [ ]  |
| OUTLET VALVE CONFIGURATION |
| HORIZONTAL YES [ ]  NO [ ]  | MANUFACTURER:        | MODEL:       | CLOSE COUPLED [ ]  |
| VERTICAL YES [ ]  NO [ ]  | SIZE: 1.5” [ ]  2” [ ]  3” [ ]  4” [ ]  | 3-A CERTIFICATION (56-XX) YES [ ]  NO [ ]  (If no, provided statement of comparable compliance by manufacturer.) |

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| AIR SPACE HEATING (Choose one method) |
| INCREASED PRODUCT TEMPERATURE | YES [ ]  N/A [ ]  |
| **STEAM OF** **CULINARY QUALITY** | YES [ ]  NO [ ]  |
| **HEATED AIR** | COMPLIES WITH 3-A ACCEPTED PRACTICE 604-05 | MAKE:       | YES [ ]  N/A [ ]  |
| SUPPLEMENTAL DOCUMENTATION PROVIDED [ ]  |
| AIR MOVEMENT OPERATIONAL | MEETS 3-A 24-03 SECTION K [ ]  |
| **CULINARY STEAM**(Choose one) | COMPLIES WITH 3-A ACCEPTED PRACTICE 609-03 | YES [ ]  N/A [ ]  |
| COMPLIES WITH PMO APPENDIX H, SECTION III  | YES [ ]  N/A [ ]  |
| NOTE: for Non 3-A 24-03 COMPLIANT AUXILIARY INFORMATION (complete all that apply) See Supplemental Documentation below |
| MINIMUM FILL CAPACITY:       | DOCUMENTATION for VERIFICATION of FOAM GENERATION [ ]  |
| DOCUMENTATION for VERIFICATION of AGITATION [ ]  | DOCUMENTATION for VERIFICATION of AIR SPACE HEATING [ ]  |

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| \*Submit completed applications and supporting documentation to datcpdfsplanreview@wisconsin.gov or to your locally assigned Dairy Technical Specialist at least 30 days prior to installation/ modification. |
| The undersigned hereby certifies that the information provided on this form and all additional supporting documents required are true, complete and accurate to facilitate review for determination of compliance to *Wis. Admin. Code ch. ATCP 65.60*. “Batch pasteurization equipment shall be constructed and operated so that pasteurization complies with item 16p(A) of the PMO and with applicable“3−A Sanitary Standards” and “3−A Accepted Practices" listed in chapter [ATCP 65 Appendix A](http://docs.legis.wisconsin.gov/document/administrativecode/ch.%20ATCP%2065%20Appendix%20A). |
| AUTHORIZED SIGNATURE | TITLE      | DATE      |

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***Supplemental Documentation***

**Batch Pasteurization Equipment**

**Not Certified**

**To 3-A® Sanitary Standard For**

**Non-Coil Type Batch Pasteurizers, Number 24-03**

**Agitation Validation**

Document that the agitation method and operation results in uniformity of composition and temperature throughout the product to the extent that the simultaneous temperature difference between the warmest and coldest product in the pasteurizer will not exceed 1°F (0.5°C) at any time during the holding period. Include documentation that the agitation is designed to sweep the product effectively through all zones occupied by the product, including the outlet, flare, and the outlet passage through the shell. Compliance with this temperature requirement shall be validated for each equipment model design and size, and when changes are made to the equipment design.

**Foam Generation Validation**

Document the generation of foam does not exceed one (1) inch in thickness at any time during the legal (30 minute) holding period.

Use chocolate milk made by blending chocolate syrup with cold whole milk, or commercially prepared ice cream mix, or any similar product that can be shown to be at least as vulnerable to the production of foam and operate the pasteurizer at maximum speed under conditions of use. Verify the foam level does not exceed one (1) inch in thickness at any time during the legal (30 minute) holding period.

**Air Space Heating Thermal Validation**

Document for systems using culinary steam or heated air for air space heating for compliance with the following criteria.

Position temperature sensors (accurate to + or – 0.5 degrees F (+ or – 0.2°C)) 1 to 2 inches from the vessel’s liner at 90 degree intervals around the vat, and at the vat’s center (5 in total), at a distance of one to two inches above the product level. Install the air space thermometer in its normal location. During thermal validation, all sensors shall indicate a temperature that is higher than or equal to the temperature reading of the air space thermometer and the air space thermometer must have a temperature reading of at least 150°F (66°C) (legal air space temperature).