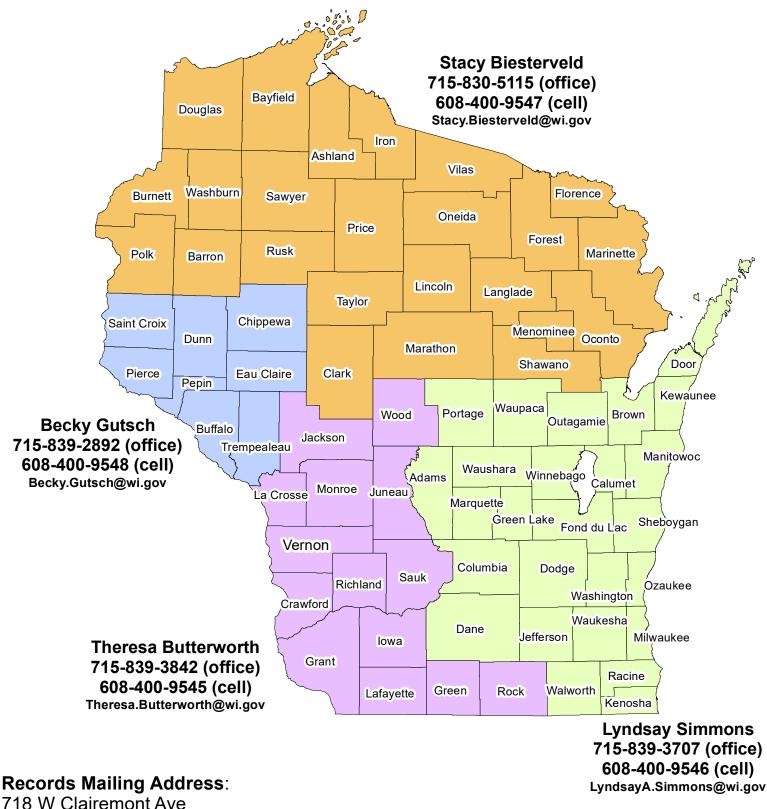
Dairy Plant Resource Manual

Milk producer license requirements



Wisconsin Department of Agriculture, Trade and Consumer Protection Division of Food and Recreational Safety 2811 Agriculture Dr. P.O. Box 8911, Madison, WI 53708-8911

Dairy Producer Records Management Assignments



Suite 128 Eau Claire, WI 54701

Phone: 715-839-3844 Fax: 715-839-3867 datcpecdairy@wisconsin.gov Email:

F-fd-253 (rev 2/1/2023)

New Milk Producer License

Submit new license applications online. The <u>attached instructions</u> describe how to submit an application through <u>MyDATCP</u>, and here is a <u>video demonstration</u> of the process.

Completed applications shall be submitted at least 14 calendar days prior to the first milk pickup. This will allow time for the sanitarian to schedule the licensing inspection prior to the first milk pickup.

MyDATCP replaces the paper milk producer application form for new license applications. The following documents must be uploaded with the application:

- Milk producer affirmation form with the producer's signature.
- Water report form for each well.
- A negative water result collected within two years for each well.
- A field rep's inspection report.
- If applicable, also upload a notarized SSN exemption form, premise ID exemption form, and non-pressurized storage vessels (NPSV) DNR water approval letter. If the notary used an embossed raised seal, shade it with a pencil prior to uploading.

Save these documents to your device prior to starting the application process. Incomplete applications will delay the licensing inspection.

Do not leave application paperwork at the farm.

After submitting the application and required documents, the dairy plant field representative must contact the appropriate dairy sanitarian to schedule the licensing inspection.

• Sample milk from the first pick up and test it for SPC, SCC and antibiotics. Report results to DATCP within seven days.

Premises Identification Registration

A livestock premises registration identification number is required on all **new** Milk Producer license applications. For more information or to register call 608-224-4872 or 888-808-1910.

Obtaining a Temporary License:

First, apply for the new license through MyDATCP. Then contact the dairy sanitarian to schedule the licensing inspection. If the sanitarian cannot conduct the licensing inspection prior to the first milk pickup, the sanitarian will have the dairy plant field representative contact the Eau Claire office staff to request a temporary license.

- A temporary license must be issued **before** the first milk pickup is scheduled. Obtain confirmation from the Eau Claire office staff that a temporary license has been issued.
- A temporary license shall be effective on date of the first scheduled milk pickup.
- Premises ID exemption license application note: As of January 1, 2023, temporary licenses will **no longer** be automatically issued to premises ID exemption license applications. Temporary licenses are only issued if the sanitarian is unable to conduct the licensing inspection prior to the first milk pickup.

Milk Producer Religious Exemption Form from Wisconsin Livestock Premise ID Registration Application Form

Members of a recognized religious group, district, or congregation with sincerely held religious beliefs opposing registration of livestock premises under Wis. Stat. § 95.51 may apply for a milk producer license using milk producer application and a notarized Statement for Religious Exemption (form F-fd-007A).

• This form may only be used by an individual or a married couple claiming a religious exemption. General partnerships, LLCs, corporations, and other business entities cannot claim a religious exemption under this process.

Milk Producer Paper Application Form Uses

Paper Milk Producer License Application forms are used for a **plant transfer, B to A, address correction**, **spousal name change**, or **existing partnership additions.** Please **type** or **print neatly**. The form is to be completed and signed by the field representative. The producer must sign a Milk Producer License Application Affirmation form. See additional instructions below.

Submit the completed application to: Email: <u>DATCPDLFSEauClaireOffice@wisconsin.gov</u> Or Fax: 715-839-3867 Or Mail to: DATCP – DFRS 718 W. Clairemont Ave, Suite 128 Eau Claire, WI 54701

Request a Grade A Permit for an Existing Grade B Farm (B to A):

Complete the milk producer application and attach the following documents:

- Current negative well water test, within two years.
- Current negative cooling water test, within six months (posted at the farm).
- Signed field person's inspection.
- Signed Milk Producer License Application Affirmation form.
- Contact your dairy sanitarian to schedule a "B to A" inspection.

Plant Transfer:

Email, fax or mail the completed milk producer application and signed Milk Producer License Application Affirmation form to the Eau Claire office within three (3) business days of the milk producer's first pickup.

• Sample milk from the first pick up and test it for SPC, SCC and antibiotics. Report results to DATCP within seven days.

Address Correction:

If the farm address has been changed by the post office (the location of the farm must remain the same), or if the mailing address has changed, email, fax or mail the completed milk producer application and signed Milk Producer License Application Affirmation form to the Eau Claire office.

Spousal Name Change:

Email, fax or mail the completed milk producer application, signed Milk Producer License Application Affirmation form and social security number to the Eau Claire office.

Existing Partnership Addition or Deletion:

Email, fax or mail completed milk producer application and signed Milk Producer License Application Affirmation form to the Eau Claire office within three (3) business days of the milk producer's first pickup.

Ownership Changes:

Any legal change of ownership of a milk producer license or Grade A permit requires a new license application, a fee, and an inspection. Examples of ownership changes include:

Ownership Structure Change					
Current ownership is one of the	If current ownership changes to any				
following:	of the following:				
Individual or married couple	Individual or married couple				
General partnership	General partnership				
Corporation	Adding or deleting a partner				
Cooperative	• LLP				
Trust	• LLC				
Limited Liability Company	Corporation				
(LLC)	Cooperative				
Limited Liability Partnership	• Trust				
(LLP)	• Estate				

- **Exceptions** to legal ownership changes of a milk producer license or Grade A permit, which do not require a fee or an inspection, include:
 - When an individual milk producer dies, their license number can be transferred into their spouse's name without an inspection. For any other family member wishing to take over the milking operation, a new farm licensing inspection is required.
 - Adding a spouse to a license held by an individual.
 - Deleting or changing a spouse on a license held by a married couple.
 - Adding or deleting a partner to an existing license. This does not apply to general partnership licenses.
 - Changes in shareholders of a corporation or members of a LLC or cooperative does not constitute an ownership change. If the license is held by only a corporation, cooperative, LLP, or LLC, those entities must be dissolved to create an ownership change.
 - In some cases, trusts or estates hold licenses. When a trust is dissolved and transfers the license to an individual or entity, that action should be considered a change in ownership. Estates are more difficult to determine. Contact the Eau Claire office at 715-839-3844 for more information.

Licensing and Grade A Permits for County Fairs and Temporary Events

County fairs and temporary events that intend to sell milk that is collected during the fair or event are required to be licensed. A Grade A permit is required to ship Grade A milk. Dairy facilities for fairs and temporary events must be relicensed and re-permitted every year or for each event during a year. The same procedures apply for licensing and permitting of dairy facilities for fairs and temporary events that apply to dairy farms. **Submit the new license application through MyDATCP 14 days prior to the event and then contact the dairy sanitarian to schedule a licensing inspection.** Sample milk from the first pick up and test it for SPC, SCC and antibiotics. Report results to DATCP within seven days. An out of business status change form is required when the fair or temporary event is over.

Multiple Licenses at One Farm Location

If multiple dairy producer licenses are held at one farm location, the following guidelines apply:

- If the separately licensed entities share any of the following, both licenses and permits(Grade A) will be equally affected:
 - Herd
 - Barn
 - Milking Facility
 - Bulk Tank
 - Milking Equipment
- Additionally, the following must be taken into consideration:
 - Multiple licensed entities at one location may ship to different plants. However, in this case, only one license may be permitted as Grade A to insure only one bulk tank unit (BTU) is affected for state and federal survey purposes.
 - Multiple licenses at one location may be permitted as Grade A only if shipping to the same dairy plant.
 - Each dairy plant must collect their own milk sample and test it for monthly official quality (SPC, SCC and drug residue). Milk quality, water results, and site inspection results will affect all licenses at the same location.

Multiple Species at One Farm Location

When there are multiple species shipping milk at one farm location, a separate license is required for each species

DAIRY PLANT NAME: PREVIOUS DAIRY PL			PREVIOUS L	AIRY PLANT NUMBER:				
DAIRY PLANT NAME:								
			DAIRY PLAN		PATRON NUMBE			ints with le BTU's include l:
	NFORMATION							
roducer's dairy o roducer fully info	peration and water sup	oply and find the producer's ATE) Wisconsin milk produc	operation i	n compliance with	Wisconsin milk prod			
		tion for a Milk Producer lice			r the production an	d sale of raw	milk. I hav	ve inspected the
OUNTY NAME & NO.	SS STREET (IF DIFFERENT)			PALITY			STATE	ZIP
OMPLETE MAILING			CITY				STATE	ZIP
)	-						1	
ELEPHONE NUMBER	AS NAME OR TRADE NA		EMAIL					
		ION, LLC, LLP OR COOPERATI	VE					
SPOUSE FIRST NA		MIDDLE NAME		LAST NAME		SUFFIX		
IRST NAME	ſ	MIDDLE NAME		LAST NAME		SUFFIX		
PPLICANT'S LEG	AL NAME: (PARTNERSHI	PS: LIST ALL PARTNERS – Leg	jal name as	shown on Birth Certifi	cate or SS# Card).			
] General Partn	ership (Include Copy of	Partnership Agreement or F	ederal Tax	Form 1065 with fir	ancials blocked out	:)		
] Individual/Mar	ried Couple (SSN colled	ction required for each individ	dual) 🗌 Ll		Cooperative 🗌 Co	orporation 🗌 I	Estate 🗌 T	rust
- 0	ses at farm (indicate oth			5				
Add Grade A Mailing Addre		 Plant Transfer Spousal Name Change 		ntary A to B (Patror ting Partnership Ad		Existing Part	inership De	letion
-	DMENT - NO FEE RE							
Beef Cattle		Dairy Cattle			🗌 Llamas, alpaca	s, and/or othe	r camelids	
_	ens, turkeys, geese, an d for hunting)				 Horses, mules, Deer, elk, moos other cervids 	•		
SHECK ALL LIV ☐ Swine	ESTOCK KEPT AT FA	RM: □ Goats						
95.51, check all I	ivestock kept at farm.	ing a milk producer license b	out assertir	ig a religious exemp	otion from livestock	premises regi	stration law	rs, Wis. Stat. §
					operation?	-		
Robotic Milkin Can Milk		☐ Sheep ☐ Other:			☐ No If no, how many w	ells provided v	vater to the	dairy
] Milk Producer] Grade A Perm	License (Fee Required)	☐ Cow ☐ Goat	Num	per of AMI Robots	OPERATION?			
ICENSE TYPE (c	heck all that apply):	TYPE OF MILK:	AMI F	OBOTICS:	IS MUNICIPAL WAT	ER SUPPLIED		
MILK P		R LICENSE					Wis. St	at. § 97.22
ALL WISCONSIN - WISCONSIN		9-3844 Fax: (715) 83		,	cdairy@wisco	nsin.gov		
	v	<i>d and Recreational S</i> ont Ave., Suite 128,		ire WI 54701		L	LIC. NO.	
		1 10 10	·	e and Consume			OFFICE	

	1		1	I.
SANITARIAN LICENSE RECOMMENDATION:	Milk Producer License (c	heck one)	Grade A Permit (check one)	Date:
	Approve: D Full Status D	Conditional 🗖 Deny (no refund)	Approve Deny	540.



Wisconsin Department of Agriculture, Trade and Consumer Protection Division of Food and Recreational Safety 718 W. Clairemont Ave., Suite 128, Eau Claire, WI 54701 Phone: (715) 839-3844 Email: datcpecdairy@wisconsin.gov Fax: (715) 839-3867 OFFICE USE ONLY License Number

MILK PRODUCER LICENSE APPLICATION AFFIRMATION

Wis. Stat. § 97.22

To be Completed and Signed by the Milk Producer. The Dairy Plant must upload this document when submitting the Milk Producer License Application online at mydatcp.wi.gov

PARTNERSHIPS : list all partners		LP	Сооре	erative	Corporation	Estate	🗌 Tru	ust
PRODUCER INFORMATION:								
FARM NAME: (Optional) (Cannot be us	ed without appli	cant's name)		COUNTY			PHONE (:) -
MAILING ADDRESS STREET				CITY			STATE	ZIP
DAIRY FARM ADDRESS (if different m	ailing address)			CITY			STATE	ZIP

I, the undersigned, hereby make application for a Milk Producer license and/or Grade A permit for the production and sale of raw milk. If a license and/or permit is issued, I agree to the inspection of this dairy operation by authorized personnel of the department at any reasonable hour, and understand that refusal of any part of an inspection will result in suspension or revocation of my license and/or permit. I agree to conduct operations and maintain premises in accordance with the laws of Wisconsin. I understand that I may not sell or distribute milk as Grade A milk unless I also hold a Grade A farm permit. Licenses are not transferable between persons or locations. Milk producer licenses and permits are required by *Wis. Stat.* § 97.22. Penalties are prescribed in *Wis. Stat.* § 97.72, and *Wis. Adm. Code ch. ATCP* 65. Personal information you provide may be used for purposes other than that for which it was originally collected (*Wis. Stat.* § 15.04(1)(m)).

SIGNATURE OF APPLICANT OR AUTHORIZED REPRESENTATIVE

DATE

DAIRY PLANT INFORMATION:		
For Plants with multiple BTU's include BTU ID:		
DAIRY PLANT NAME:	DAIRY PLANT NUMBER:	PATRON NUMBER:
PREVIOUS DAIRY PLANT NAME:	PREVIOUS DAIRY PLANT NUMBER:	PREVIOUS PATRON NUMBER:

F-fd-03 Rev (07/21)						
Wisconsin Department of A Division of Food and Recreation				9-3867		
Email: <u>datcpecdairy@wisconst</u>		. ,	· ,		aire. WI 54701	
MILK PRODUCER WAT				- ,	,	
To be Completed and Signed by Dairy Plant Field Rep				m premises used to		
supply water to the dairy operation.					Wis. Stat. § 97.22	
LEGAL NAME: (PARTNERSHIPS: LIST ALL PARTNE	RS) 🗌 LLC 🗌 LP 🗌 LI	_P 🗌 Coopera	tive 🗌 Corportation 🔲	Estate 🗌 Trust		
DOING BUSINESS NAME OR TRADE NAME: (OPTIONAL) (CANNOT E	BE USED WITHOUT APPLICAN	IT'S NAME)				
COMPLETE MAILING ADDRESS STREET		0	CITY	STATE	ZIP	
DAIRY FARM ADDRESS STREET (IF DIFFERENT)		0	CITY	STATE	ZIP	
COUNTY	MUNICIPALI	ΤΥ		TELEPHONE ()	NUMBER -	
Dairy Plant Information						
DAIRY PLANT NAME	DAIRY PLANT NUMBER		PATRON NUMBER	For Plants include BT	with Multiple BTU's U ID	
Safe Water Sample (Copy must be attached) Da	Safe Water Sample (Copy must be attached) Date: Lab:					
TYPE OF WATER SUPPLY (check)	Driven Dit D	Non Pressuri	zed Storage Vessel	□ Spring Box □	Other	
Location: Well Number or Name: Year Constructed Unknown						
Has the WI Department of Natural Resources (D	,		🗌 Yes 🗌 N			
If yes, does producer have evaluation letter?		-	s, please attach a cop	y with this form		
Are all stock watering devices and plumbing fixtu	res in compliance wit	h the Wiscon	sin DSPS 382?		🗌 Yes 🗌 No	
Dairy Plant Field Representative complete sectio						
The minimum distance separating wells or reservance are listed below.* If wells do not meet the distance						
must have a written approval letter from the DNR filled out for each additional well						
(Fill in all blanks with number of feet from each so	ource of contaminatio	n with N.A. w	here it does not apply	(.)		
8 FEET MINIMUM:		50 FEET MII	NIMUM:	•		
1. Non-Complying well pit		1. Animal ya	d including calf hutch	es		
2. Nonconforming reservoir (Water)		2. Animal ba	rn/pen covered area v	vhere animals are l	kept	
3. Storm Sewer		3. Milkhouse	drain outlet			
4. Above/Below-ground swimming pool		4. Vegetated	treatment area			
25 FEET MINIMUM: 1. Buried grease interceptor		5. Silo with p		4 · · · · · · · · · ·		
2. POWTS Holding component (Holding Tank)		 Manure re Cemeterie 	ception tank or hoppe	er (Liquid Tight)		
3. POWTS Treatment component (Septic Tank)		-	out pit , but with concr	ete floor and drain		
4. Lake, Stream or River Shoreline		9. Barn gutte	•			
5. Sewers conveying manure liquids (Gravity/Pre			lage storage tube			
100 FEET MINIMUM:		250 FEET M				
1. Manure storage structure (Fabricated, Liquid T	ïght)	1. Existing or	proposed sanitary la	nd fill site		
2. Gasoline or other petroleum or L.P. Tank (Buri (Does not apply to L.P. tanks and wells serving s residences)	ed) ingle family	absorption, s	urrow land spreading, eepage retention, sto slow sand filter or filt	rage and treatment		
1,200 FEET MINIMUM						
1. Landfill site (Existing, Proposed or Abandoned)					

I have inspected the producer's dairy operation and water supply and find the producer's operation in compliance with Wisconsin milk producer requirements. I agree to keep this producer fully informed of all (APPROPRIATE) Wisconsin milk producer production and handling requirements. I certify the information given is accurate and the well location and construction is in compliance with the Wisconsin Administrative Code ch. NR 812.*

PLEASE READ THIS IMPORTANT NOTICE

PLEASE COMPLETE THIS FORM AND *MAIL TO:*

Division of Food Safety 718 Clairemont Ave. Suite 128 Eau Claire, WI 54701-6143

Sec. 93.135, Wis. Stats., requires the department to collect the Social Security Number (SSN) of every **Sole Proprietor or Individual** applying for an original or renewal, license registration or certificate. This requirement DOES NOT APPLY to General Partnerships; however, **they must provide a copy of their legal partnership agreement to show they are exempt.**

IT ALSO DOES NOT APPLY to the following which are registered with the Department of Financial Institutions. Limited Partnerships, Limited Liability Partnerships (LLP), Limited Liability Companies (LLC), Corporations or Cooperatives. Please do not substitute a Federal Employer Identification Number for the Social Security Number, even if you are an individual that holds both numbers.

The department is required by law, to provide the collected Social Security Numbers to the Department of Workforce Development. The collection of SSNs and the provision of SSNs to the Department of Workforce Development will be done in a manner which will protect the confidentiality of SSNs. They will be encrypted in the department's computer system before the SSNs are provided to the Department of Workforce Development.

BY LAW, THE DEPARTMENT MAY NOT ISSUE OR RENEW A LICENSE UNTIL THE LICENSEE PROVIDES THEIR SSN.

(Please remember that if a married couple is listed on the license, both SSN's must be provided)

Licensee's Name	
Spouse's Name (if listed on License)	
"Doing Business As" (<i>if applicable</i>)	
License Number	
Social Security Number (Individuals Only)	
Social Security Number (Spouse if on License)	

• Any personally identifiable information, as defined under s. 19.62(5), Stats., requested on this form may in the future, be used for purposes other than that for which it is originally being collected, as stated above. To do this would require a new law to be passed by the legislature.

F-fd-360 (New 01/12)



Instructions: Complete ALL information requested below. Swear or affirm to the contents of this affidavit and sign before a notary public, who will impress a notarial seal or seal of office as applicable on the notarial certificate below.

If the information provided in this affidavit cannot be verified by the Department, then the application for a license may be denied.

STATE OF WISCONSIN)	
) ss.	
COUNTY OF)

_____, being first duly sworn on oath, deposes and (Name of person signing affidavit)

states as follows:

1) I make this affidavit for the purpose of verifying the existence of a general partnership which is seeking a license from the Wisconsin Department of Agriculture, Trade and Consumer Protection, Division of Food Safety.

2) The name of the general partnership is:

3) I am a partner in said general partnership.

4) The other partner(s) in said general partnership and their addresses are as follows:

(signature)

(print name)

(address)

Subscribed and sworn to before me this _____ day of _____, 20____.

(signature of notary)

(print name of notary) Notary public, State of Wisconsin My commission expires _____

Department of Agriculture, Trade and Consumer Protection (DATCP) Division of Food Safety and Inspection 718 W. Clairemont Avenue, Suite 128 Eau Claire, WI 54701 Phone: (715) 839-3844

Instructions: Complete ALL information requested below. Affirm to the contents of this statement form and sign before a notary public, who will impress a notarial seal or seal of office as applicable on the notarial certificate below.

This form must be submitted with DATCP Form F-fd-007 (Milk Producer Application *For an Individual or Married Couple Claiming a Religious Exemption From Livestock Premises Registration*) when seeking a milk producer license but asserting a religious exemption from livestock premises registration law, Wis. Stat. s. 95.51. It must be completed by *an individual*. If a married couple is seeking a milk producer license, <u>at least one spouse</u> must submit this form with DATCP Form-Fd-007.

If the information provided in this form cannot be verified by the Department, then the application for a milk producer license may be denied.

STATEMENT FOR RELIGIOUS EXEMPTION

STATE OF WISCONSIN))) COUNTY)	SS.		
County where this form is signed			
I, Producer's First Name Middle Nam facts are true:	e Last name s	, affirm that the foll Suffix, if any	lowing
1. I am an adult resident of for a milk producer license at Dairy Farm Addre		nty, Wisconsin, who is	applying
	(If same as the address direc	tly above, you may write "s	 ame as above")
3. Since <u>Month Day Y</u>			
religious group/district/congregation known a	Religious Group/District/Co	ngregation Name (e.g., Old	d Order Amish)
 4. As a member of this religious teachings, which include a sincerely held religioned with the sincerely held religioned with the sincerely held religion. 5. The name of the authorized recan verify my religion's opposition to register Registration law, Wis. Stat. s. 95.51(2), is First 	igious belief opposing re epresentative of my relig	gistration of a livestocl ious group/district/con under Livestock Prem	< premises gregation who lises
whose religious title is	t Name Middle Initial	Last Name _, and who can be co	
Mailing Address City	State	Zip	
Phone Number (Optional But May Expedite Application	n)		·
Signed and affirmed before me	Signature of Produce	er Seeking Exemption	
on			
by Producer's Name	Print Full N	ame	
Signature of Notarial Officer, State of Wisconsin			
Print Name of Notary			

My commission expires_____



Statement to Comply with s. 93.135(1m), Stats.

The Department of Agriculture, Trade and Consumer Protection is providing this form to you to comply with s. 93.135(1m), Stats., for individuals who are applying for a license listed under s. 93.135(1), Stats., and DO NOT have a Social Security number. If an individual who applies for a license listed under s. 93.135(1), Stats., does not have a Social Security number, the individual, as a condition of obtaining that license, shall submit a statement to affirm that the individual does not have a Social Security number. The form of the statement shall be prescribed by the Department of Children and Families. A license issued in reliance upon a false statement submitted is invalid.

Full Nam	ne of Applicant: (First)	(Middle)	(Last)	(Maiden)	·	
	<u> </u>				- -	
Address	: (Street)	(Apt)	(City)	(State)	(Zip Code)	
Mailing	Address (If different than al	pove):				
Date of	Birth:		License Applying Fo	or:		
		•	Statement			
I hereby	attest that I cannot sup	ply a Social Security num	ber because: (please che	ck one of the follov	ving)	
[] I have an approved IRS Form 4029 (exemption from paying Social Security taxes).						
[]	I have not received a Social Security Number or approved IRS Form 4029 at any time.					

(You may be contacted for additional information).

If at any time in the future if I apply for a Social Security number, I will provide it to the Department of Agriculture, Trade and Consumer Protection within 30 days of receipt.

I understand that providing a false statement automatically makes an application for a license invalid. Therefore, any and all licenses issued as a result will also be invalid, and I may be subject to penalties under s. 946.32, Stats., and for operating without a valid license under s. 93.135(1m)(b), Stats., subject to penalties under the applicable licensing statute.

Applicant Signature	Subscribed and affirmed to before me
	this day of
	in the year
	My commission: is permanentexpires

The completed notarized form must be submitted with your application to the Department of Agriculture, Trade and Consumer Protection.

Information provided on this form (including any attachments) may be shared with others only for the purpose(s) of administration of the child support program and other related programs [Wis. Statutes, s. 49.83].

Farm Status Change Information:

This form needs to be submitted to DATCP within 3 business days from the effective date.

- Complete if the milk producer has gone out of business or has applied for a new license. Include the effective date.
- Mark the applicable box Dry Cows, Dry Goats/Sheep or Terminated by Plant and the effective date. If milk producer is terminated by the plant and does not transfer to another plant within 30 days, the milk producer license will be placed out of business.
- Mark Resume Operations and include the effective date.
- Grade A farms may be in dry status for 60 days and may resume shipping Grade A milk without an inspection during that 60 day period. The farm shall still be inspected as Grade A if due while in dry status in the first 60 day period. Grade B farms are not required to have a routine inspection while in dry status.
- Grade A farms that are in dry status longer than 60 days will have their Grade A permit voided. They will retain their Grade B license for an additional 120 days and may resume shipping Grade B milk at any time during that period, without an inspection. If they wish to resume shipping Grade A milk, a B to A application must be submitted and an inspection shall be conducted.
- Grade A and Grade B farms that are in dry status for longer than 180 days total time, shall have their licenses voided. If they want to resume shipping milk after this occurs, a new license shall be issued along with an inspection prior to shipping milk. **NOTE:** The only exception to this is goat and sheep milking operations. They are allowed to be in Dry Status for up to 240 days before the license is put Out of Business.
- Complete for all in-plant patron number changes. Fill in old patron number, new patron number and the effective date. For plants with multiple BTU's, include the BTU number.
- Complete when a milk producer transfers from your plant and the effective date of this action. If you do not know which plant the milk producer transferred to, fill in "UNKNOWN".

Farm Reinstatement Request Form:

- Reinstatement after an SPC or Inhibitory Degrade:
 - Reinstatement Request form is to be completed and signed by the milk producer.
 - SPC Degrade: An SPC result equal to or less than 100,000 with a negative antibiotic is required. The sample date must be after the effective date of the permit suspension, and the sample is to be tested at a certified lab.
 - Inhibitory Degrade: A signed Certificate of Completion for drug residue prevention protocol.

Note: Contact the Dairy Sanitarian to schedule an inspection. The inspection will be conducted within 7 days of DATCP receiving the request. Have the Reinstatement Request form and complying lab result or the signed Certificate of Completion available at the farm for the Dairy Sanitarian.

Reinstatement after an SCC Degrade:

- Reinstatement Request form is to be completed and signed by the milk producer.
- An SCC result equal to or less than 750,000 is required. The sample date must be after the effective date of suspension and the sample is to be tested at a certified lab.
- Submit Reinstatement Request form and complying lab test result to DATCP. If approved, the Grade A Permit will be reinstated within 7 days of DATCP receiving the request.



Wisconsin Department of Agriculture, Trade and Consumer Protection Division of Food and Recreational Safety Phone: (715) 839-3844 Fax: (715) 839-3867

Please mail directly to: 718 W Clairemont Ave., Suite 128, Eau Claire WI 54701

Milk Producer License Status Change Wis. Stat. § 97.22

Personal information you provide may be used for purposes other than that for which it was collected. Wis. Stat. § 15.04(1)(m)

DAIRY PLANT	DAIRY PLANT NO.			
PRODUCER NAME		PRODUCER NO.		
COUNTY NAME & NO.	TOWNSHIP NAME & NO.		SECTION	
LICENSE NO.		CHECK ONE:	GRADE A GRADE B	
1. Producer Out of Business (no longer milking at this lo	cation or sold cows) 🗌		Effective Date:	
 Temporarily stopped operations: Dry cows a. Resume operations 	Dry Goats/ Sheep Termir	nated by Plant	Effective Date:	
 In-plant patron number change: Old No. For plants with multiple BTU's, include BTU ID: 	New No.		Effective Date:	
4. Transferred to: Plant Name & Location:			Effective Date:	

SIGNATURE OF AUTHORIZED DAIRY PLANT REPRESENTATIVE

TODAY'S DATE



Producer:

Wisconsin Deptartment of Agriculture, Trade and Consumer Protection Division of Food and Recreational Safety 718 W. Clairemont Ave., Suite 128 Eau Claire, WI 54701 Fax: 715-839-3867

REINSTATEMENT REQUEST

Wis. Stat. § 97.22

• Complete this form and have available for your Field Representative.

SPC / Inhibitory / Inspection Reinstatement - I request reinstatement of my grade A dairy permit/dairy producer license. As a part of this process, I request a reinspection of my dairy production facilities to determine whether the conditions which caused the suspension of my permit/license are now in compliance. I certify that all cited conditions are now in compliance.

SCC Reinstatement - I request reinstatement of my grade A dairy permit/dairy producer license. I certify that all SCC qualities are now in compliance.

PATRON NAME	
ADDRESS	
TELEPHONE	PLANT NUMBER - PATRON NUMBER
SIGNATURE	DATE

This institution is an equal opportunity provider.

Personal information you provide may be used for purposes other than that for which it was collected (Wis. Stat. § 15.04(1)(m)).

Milk Producer Lab Information

Reporting Official Producer Quality Tests

Lab result time requirements:

- Official lab results must be submitted to the department within seven days of the test date.
- Immediate response levels must be submitted within three days of the test date.
- #3 rechecks must be submitted within three days of the test date.
- #1 and #4 rechecks must be submitted within seven days of the test date.
- See the Recheck Lab Report form for recheck information

Electronic reporting of all lab results was required on January 1, 2003.

- 1. Grade A patron in degrade status shall be reported as Grade B.
- 2. All SPC samples must be tested within 60 hours. All SCC samples must be tested within 72 hours.
- 3. All reporting must be by patron number. Letters or hyphens cannot be used as part of a patron's number. Patron numbers are limited to six digits. When submitting results electronically, add leading zeros to make the patron number six digits (000021)
- 4. Monthly official lab results must include plant, patron, and lab number, sample, and test dates, temperature, SPC, SCC, and antibiotic.
- 5. When milk is picked up within two hours of milking time, include that information with the lab result.
- 6. If a correction is made on a lab result, submit an explanation and corrected lab sheet.
- 7. No duplicate patron numbers are allowed within a plant.
- 8. If a patron has more than one tank or pickup per day, official lab counts need to be averaged. Only submit the averaged result. Inform your testing laboratory of this requirement.

Milk Quality Standards - Producer Samples

Grade A	Grade B
≤100,000/ml	≤300,000/ml
≤750,000/ml	≤750,000/ml
≤1,500,000/ml	≤1,500,000/ml
≤45°F ≤50°F	≤45°F (cans: ≤50°F) ≤50°F
	≤100,000/ml ≤750,000/ml ≤1,500,000/ml ≤45°F

 \leq Means less than or equal to

*All species excluding goats

DATCP will issue the following based on counts exceeding the standards:

- Grade A Intent to Suspend when 2 out of 4 results exceed 100,000 for SPC and 750,000 for SCC.
- Grade B Warning Notice when 2 out of 4 results exceed 300,000 for SPC and 750,000 for SCC.
- Intent to suspend and warning notices stay in effect until there are no longer 2 out of 4 results exceeding the standards.

- Grade A Permit Suspension for sheep and cows when 3 out of 5 occurrences exceed 100,000 for SPC and 750,000 for SCC.
- Grade A Permit Suspension for goats when 3 out of 5 occurrences exceed 100,000 for SPC and 1,500,000 for SCC.

Note: SPC test results must have a negative antibiotic result from the same sample for the SPC result to be a valid result.

Immediate Response

Immediate Response Levels - Producer Samples				
Grade A or B Cows/Sheep Goats				
Bacteria Count (SPC)	>750,000/ml	>750,000/ml		
Somatic Cell Count (SCC)	>1,000,000/ml	None		
Inhibitory Substances	Positive*	Positive*		

> Means greater than

SPC and SCC Immediate Response Action

- 1. Report all immediate response results to the producer and DATCP in writing within three business days of the test.
- 2. Collect and test additional samples within 14 days of the immediate response sample date. More than one sample may be tested within this 14 day period. The goal is to obtain a result that is equal to or less than the immediate response levels listed above. SPC results must have a negative antibiotic result from the same sample.

If a sample result is obtained within 14 days that is less than or equal to the immediate response level, the immediate response has been cleared. Report this result to the producer and to DATCP as a #3 recheck within three days of the test date. The producer can continue to ship milk with no further action taken.

If there are no sample results obtained within 14 days that are less than or equal to the immediate response level, the immediate response has been not been cleared. It is the dairy plant's responsibility to immediately reject all further milk shipments. Report the 14th day result to the producer and to DATCP as a #3 recheck within three business days of the sample test date. The dairy plant shall continue to sample and test the producers milk until a result is obtained that is less than or equal to the immediate response level listed above. When a result is less than or equal to the immediate response level, report the result to the producer and to DATCP as a #3 recheck. The producer may now resume shipping milk.

Positive Inhibitory Substance Immediate Response Action

All positive inhibitory substances for producer samples and tankers must be reported within two hours.

- The plant shall report all positive results within two hours to DATCP by calling the Milk Hotline at1-800-462-5243, or by faxing results to 715-839-3867. Report all positive inhibitory substance results to DATCP in writing within three business days of the test. Report hot loads on the positive drug reside report form and positive producer samples on the recheck lab report form.
 - a. The dairy plant must reject all milk until a test result is negative. The negative result needs to be reported to DATCP as a #3 recheck within three business days of the test date. The producer can resume shipping milk when a test result is negative.
 - b. Producer must complete a Milk and Dairy Beef Drug Residue Prevention Program. The certificate, signed by the producer and veterinarian, needs to be received by DATCP within the following times:
 - Grade A 21 days from effective date of intent to suspend letter.
 - A notice of permit suspension letter will be issued to Grade A producers for failure to complete the program and submit the certificate in 21 days. Compliance action will be taken against the Grade B license if the producer fails to complete the program and submit the certificate within 45 days from the effective date of the initial intent to suspend letter effective date.
 - Grade B 45 days from effective date of warning notice letter.
 - Compliance action will be taken against the Grade B license if the producer fails to complete the program and submit the certificate within 45 days.

						RECHE	CK LAB F	REPORT	FORM			
	Grade:	<u>A</u>	_	В	_	Were	all SPC S	amples	FOR LAB USE ONLY			
		One Grade Per Sheet		Tested	Tested Within 60 Hours?							
		One Mon	th Per	Sheet		Yes	s No		SPC SCC _{ANTI}			
	Plant Name:								Control Sample Temp			
	Plant#:	Location:				Were all SCC Samples		amples				
	Lab Name:	Location.				Testec	d Within 72	Hours?	Tested by:			
						Yes <u>No</u>						
	Lab#:	Location:										
Re#	Sample Date	Patron No.	Temp	SPC	Test Date	SCC	Test Date	Anti	#1 RecheckSubmitted for a Grade A patron after a Notice of			
									Intent to Suspend. The dairy plant shall submit this recheck.			
									The sample MUST be collected between 3 to 21 days after the			
									effective date of the Notice of Intent to Suspend.			
									#3 RecheckSubmitted after an Immediate Response (IR).			
									IR= SPC > 750,000 - SCC > 1,000,000 - Positive Antibiotic. The SPC & SCC			
<u> </u>									recheck must be collected WITHIN 14 days from the sample date of the IR.			
									A negative antibiotic needs to be collected before a patron resumes			
									shipping. More than one sample may be tested to obtain a complying			
									result.			
									#4 RecheckSubmitted after a degraded patrons reinstatement to			
									Grade A. Two (2) samples per 7-day period for a total of 21 days			
									may be submitted (a total of 6 rechecks), beginning with the day			
									after the reinstatement. The sample results should be less than or equal			
									to 100,000 for SPC, and less than or equal to 750,000 for SCC.			
									Rechecks- Rechecks are part of the producer's record and are to be			
									reported to DATCP within 3 business days from the test date of the recheck.			

Drug Residue Prevention Program

When a producer's sample tests positive for drug residue, a letter is sent to the producer stating that they must complete a drug residue prevention program.

A Grade A producer is given 21 days from the effective date stated on the intent to suspend permit letter to complete the drug residue prevention program. The certificate of completion and a copy of the letter must be received in the Eau Claire Office by the completion date on the letter. If it is not received, the producer will be degraded. If DATCP does not receive the certificate of completion within 45 days of the effective date stated on the letter, further compliance action will be taken.

A Grade B producer is given 45 days from the effective date state on the intent to suspend license letter to complete the drug residue prevention program. The certificate of completion and a copy of the letter must be received in the Eau Claire Office within the 45 days. If it is not received in that time, compliance action will be taken.

Mail, Email or Fax the signed Certificate of completion to: DATCP - DFRS 718 W. Clairemont Ave., Suite 128 Eau Claire, WI 54701 Fax: (715) 839-3867 datcpecdairy@wisconsin.gov

The drug residue manual, which includes the certificate, can be downloaded from the National Dairy Farm Program website at <u>https://nationaldairyfarm.com/producer-resources/resource-library</u>.

To find the manual, scroll down to "Antibiotics Stewardship Resources – English" near the bottom of the page. Under there you will find the 2021 Drug Residue and Prevention Manual and 2019 Milk and Dairy Beef Residue Prevention Producer's Certificate of Participation.



Wisconsin Department of Agriculture, Trade and Consumer Protection Division of Food and Recreational Safety 718 W. Clairemont Ave., Ste. 128, Eau Claire, WI 54701 Phone: (715) 839-3844 Fax: (715) 839-3867

POSITIVE DRUG RESIDUE REPORT FORM

Wis. Stat. §§ 97.22 and 97.20

REPORT LOADS OF MILK CONTAINING DRUG RESIDUE ON THIS FORM

Complete the information in sections I and II immediately (within 2 hours) and provide this information to the Department's Division of Food and Recreational Safety by telephone, fax or e-mail. Then, complete the rest of the form and submit within 3 business days to: WDATCP, Division of Food and Recreational Safety, 718 W. Clairemont Ave., Ste. 128, Eau Claire, WI 54701. Retain a copy for your records.

HOT LINE NUMBER: (800) 462-5243 FAX NUMBER: (715) 839-3867 E-MAIL: datcpdairylabs@wisconsin.gov

RECEIVING PLANT:					PLANT NUN	IBER:					
PLANT ADDRESS/LOCAT	(CITY:				STATE:	ZIP:				
TANKER LICENSE NUMB	ER: WE	EIGHT OF LO	AD: L	OAD NUMBER:	1	NAME	OF HAULER:				
ORIGINATING PLANT NAI	-								PLANT NUM	/BER:	
			INFORMAT							o <i>t</i> "	
DATE LOAD SCREENED	POSITIVE:	TIME:	□ AM □ PM		:				TEST KIT LO	JT #:	
SCREENED POSITIVE FC	R:		DATE PO	SITIVE RESULT I	PHONED, FA	XED,	EMAILED TO	DATCP:	TIME:	🗆 AM	
BETA LACTAMS		ACYCLINES								🗆 РМ	
NAME OF PERSON REPO	ORTING:		·						PHONE NU	MBER:	
III. LOAD	CONFIRM		ST								
TESTING SITE:		RECEIVED:				٦	FEST STARTE	D:		🗆 AM	
	DATE:	-	TIME:	ПРМ ТЕМ	IP:	[DATE:	TIME	:	□ РМ т	EMP:
TEST METHOD:			TEST KIT LO	Т #:		٦	FEST RESULT	#1:		TEST RES	ULT #2:
							[□ pos □	NF		🗆 POS 🗆 NF
CERTIFIED WI LAB LICEN	ISE #:		NAME OF CE	RTIFIED INDIVID	UAL:				CERTIFIED	LAB ANAL	YST LICENSE #:
IV. DISPOS	SITION O	F MILK									
	-	PROCESS	ING 🛛	LOAD REJECT	ED & RETU	JRNE	D TO SELLE	R**			
**Complete Tanker Dis	sposal Re	port Form a	nd maintain	on file.							
NAME OF SELLER CONT	ACT PERSC	0N - Reporting	g plant must no	tify supplying plant	t IMMEDIATE	ELY. (C	ONLY FOR LO	AD REJECTE	ED):	DESTINAT	ION STATE:
V. POSITI	VE PROI	DUCER SA	MPLE & T	EST DATA							
PLANT # - PATRON #:	PRODUC	ER NAME:						PRODUCER	R GRADE:	DIREC	CT SHIPPER:
]в	🗆 YE	ES 🗆 NO
SAMPLE COLLECTION:			AM		SAMPLE (COLLE	ECTED BY - BI	WS NAME	& LICENSE #	t:	
DATE:	TIME:		РМ ТЕМ	P:							
TEST STARTED:		🗆 AM	TEST METHO	DD:	TEST KIT	LOT #	# :	TEST RESU	ILT #1:	TEST	RESULT #2:
DATE: TIM	IE:	🗆 РМ							🗆 POS 🗆	NF	🗆 POS 🗆 NF
CERTIFIED WI LAB LICEN	ISE #:				CERTIFIE	D LAE	B ANALYST LIC	CENSE #:			
105 -											
	IVE REC	HECK/RE	SUME SHI	PPING							
SAMPLE COLLECTION:		🗆 AM			SAMPLE (COLLE	ECTED BY – B	MWS NAME	& LICENSE #	#:	
DATE: TIM	IE:	D PM	TEM	P:							
TEST STARTED:		🗆 AM	TEST METHO	DD:	TEST KIT	LOT #	<i>t</i> :		TEST RES		
DATE: TIM		D PM									F
CERTIFIED WI LAB LICEN	ISE #:				CERTIFIE	D LAE	3 ANALYST LIC	CENSE #:			
105 -											

POSITIVE DRUG RESIDUE REPORT FORM

INSTRUCTIONS

All tanker loads of milk, including direct ship tankers from single producers, received by a dairy plant shall be tested for drug residue. If the screening site gets a positive test result on the first test of the load, the screening site must test the same sample, in duplicate, with positive and negative controls.

All positive test results, including direct ship tankers from single producers, must be reported to the Department using this form.

All confirmed positive tankers must be disposed of properly. The disposal is the responsibility of the dairy plant.

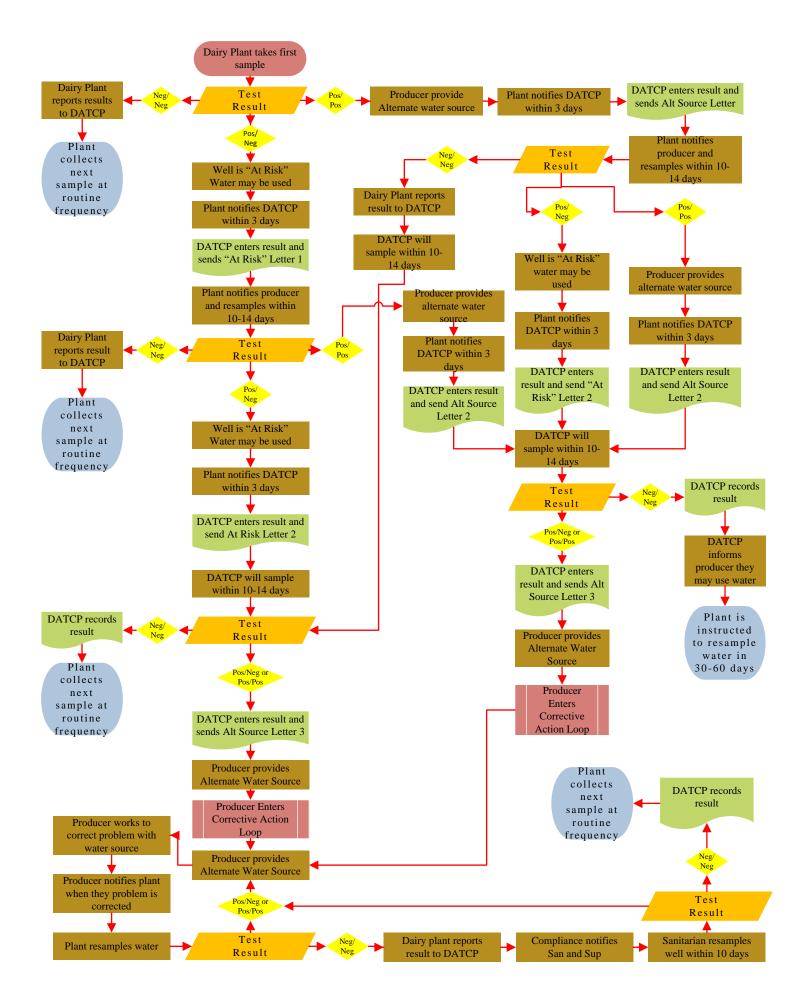
1. The information in Sections I and II must be completed IMMEDIATELY (within 2 hours) and this information is reported to the Division of Food and Recreational Safety.

By Telephone:	1-800-462-5243
By FAX:	1-715-839-3867
By E-mail:	datcpdairylabs@wisconsin.gov

- 2. The dairy plant screening the load positive is responsible for assuring that the confirmation testing is done on the load and all patron samples for that load are tested. Complete the remainder of the form as follows:
 - A. If load confirms NEGATIVE, complete Sections III and IV. Sections V and VI apply if there was a positive producer.
 - B. If load confirms POSITIVE, complete entire form, including Sections V and VI.
 Provide all the information needed for lab results on the individual producer.
 No other paperwork on the producer (s) is necessary.

Mail, fax or e-mail the completed form within 3 business days to: WDATCP - DFRS 718 W Clairemont Ave. Suite 128 Eau Claire, WI 54701

**Retain a copy of form and the Tanker Milk Disposal Report for your records





Wisconsin Department of Agriculture, Trade and Consumer Protection Division of Food and Recreational Safety,
718 W. Clairemont Ave., Suite 128, Eau Claire, WI 54701
Phone: (715) 839-3844 Fax: (715) 839-3867

WATER TEST RESULTS

Wis. Admin. Code § ATCP 65.10

LAB NUMBER:		LAB NAME:		TESTED BY:	BY:		
PLANT NUMBER:	PLANT NAME		:				
			TOTAL COLIFORM	E. COLI			
PATRON NUMBER	DATE SA	AMPLED	Positive, Negative or N/A	Positive, Negative or N/A	DATE TESTED		

PERFORMANCE-BASED FARM INSPECTIONS

Frequency Effective

Date	Months of History Included
February 1	January 1 last year through December 31 last year
May 1	April 1 last year through March 31 this year
August 1	July 1 last year through June 30 this year
November 1	October 1 last year through September 30 this year

Frequency	Reason			
	Site Permit Suspension			
	Drug Residue Permit Suspension			
	SCC Permit Suspension			
	SPC Permit Suspension			
Once every 3 months	Temperature Suspension			
	Two Notices of Re-Inspection			
	Two Positive Drug Residue			
	Two SCC Confirmed IR			
	Two SPC Confirmed IR >750,000			
	Two Confirmed IR			
	One Notice of Re-Inspection			
	Six or More Inspection Violations			
	One Positive Drug Residue			
	One SCC Confirmed IR			
	One SPC Confirmed IR >750,000			
	Two SCC 2 of 4 Warning Letters			
Once every 4 months	Two SPC 2 of 4 Warning Letters			
	Two Temperature 2 of 4 Warning Letters			
	Two SCC & SPC 2 of 4 Warning Letters			
	Two SCC & Temp 2 of 4 Warning Letters			
	Two SPC & Temp 2 of 4 Warning Letters			
	Current Water Supply Unsafe			
	One SCC 2 of 4 Warning Letter			
	One SPC 2 of 4 Warning Letter			
	One Temperature 2 of 4 Warning Letter			
	One SCC > 500,000			
Once every 6 months	One SPC >100,000			
-	Two SPC >25,000 but <=100,000			
	One Temperature > 45			
	History less than 12 months			
Once every 12 months	One SPC >25,000 but <=100,000			
	Good Job - No violations			