



# UTAH DEPARTMENT OF AGRICULTURE AND FOOD

350 N. Redwood Road  
P.O. Box 146500  
Salt Lake City, UT 84114-6500  
(801) 982-2237 Information (385) 465-6026 FAX

## APPLICATION TO LICENSE A TALMADGE AIKEN (TA) OFFICIAL MEAT ESTABLISHMENT (2203)

Fee \$150.00

Full Name of Applicant \_\_\_\_\_

Establishment Name \_\_\_\_\_

Establishment  
Mailing Address

Establishment  
Physical Address

Phone \_\_\_\_\_

Cell \_\_\_\_\_

Email \_\_\_\_\_

In registering for a MEAT ESTABLISHMENT license with the Utah Department of Agriculture and Food, I agree to comply with all of the laws and regulations governing such establishments as set forth in the Utah Meat and Poultry Products Inspection Act and any such Federal regulations that apply.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Manager, Meat & Poultry Inspection Program

\_\_\_\_\_  
Date

### EQUAL OPPORTUNITY STATEMENT AND COMPLAINT PROCEDURE

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