



State of Utah

SPENCER J. COX
Governor

DEIDRE M.
HENDERSON
Lieutenant Governor

Department of Agriculture and Food

CRAIG W. BUTTARS
Commissioner

KELLY PEHRSON
Deputy Commissioner

TRAVIS WALLER
Director, Regulatory Services

RAW FOR RETAIL PERMIT

Date: _____

Name: _____

Address: _____

City/State/Zip: _____

Phone Number: _____

Email Address: _____

Please attach the following documents:

- o Sample of the raw milk label

Requirements to be submitted by UDAF Inspector:

- o Satisfactory Water Sample
- o Compliant Milk Sample
- o 100% Passing Inspection

I, _____, hereby make application for inspection of my premises for the purpose of obtaining a permit to sell raw milk. I understand that this is not an authorization to operate a milk business, but a request for inspection only.

Dairy Producer