Saskatchewan Cottage Industry Program (SCIP) On-Farm Processing Program Application Form

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Processor Name (if different than above)	Farm Name (as it appears on your SaskMilk license)					
Name(s) of Applicants Mailing Address City Province Farm Land Location Processor Land Location Email address Fax Number Email address Fax Number Approximate volume of milk processed on-farm per day / week / month (circle applicable period) How do you intend to move the milk from the production facility to the processing facility?	Processor Name (if different than above)					
Mailing Address	SaskMilk License Number	SaskMilk Plant Number _				
City Province Postal Code Farm Land Location Processor Land Location Phone Number Alternate/Cell Number Email address Fax Number Email address Fax Number per day / week / month (circle applicable period) How do you intend to move the milk from the production facility to the processing facility? Please answer the following questions: Please answer the following questions: Do the applicants own and operate both the licensed farm and the processor? (<i>f no, contact the SaskMilk office for assistance</i>) Production Do you process milk only from your own production facility? Please attach any further information that you think may be helpful to SaskMilk in assessing your application for the Program> The undersigned certify that the information herein contained is complete, true, and correct in all respects. The undersigned further grants permission for SaskMilk to verify and investigate all information contained on or arising from this form and any attached documentation. The undersigned hereby applies for the SCIP On-Farm Processing program benefits and has read, understood, and agrees to abide by all rules and policies of the Program. The undersigned further acknowledges and agrees that approval for and continued participation in SCIP is entirely at the discretion of SaskMilk.	Name(s) of Applicants					
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Yes No Do the applicants own and operate both the licensed farm and the processor?	How do you intend to move the milk from the production	facility to the processing facil	ity?			
Are both your production license and your facility license in good standing? Facility	Please answer the following questions:			Yes	No	
(If no, contact the SaskMilk office for assistance) Production	Do the applicants own and operate both the licensed farm	and the processor?				
Do you process milk only from your own production facility?	Are both your production license and your facility license in good standing? Facility					
Have all aspects of your processing been approved by Saskatchewan Health?	(If no, contact the SaskMilk office for assistance) Production					
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	Signature	Print Name				

Signature _____

Print Name ______

Witness

Print Name _____