August 1, 2019

MEMORANDUM

TO: Milk, Milk Product, Frozen Dessert and Single-Service Container and/or Closure Manufacturing Processing Plants Possessing a 2019 Alabama Permit

FROM: Audra B. Phillips, Director
Milk and Food Processing Branch

SUBJECT: 2020 Permit Renewal

Your 2019 permit to distribute milk, milk products, frozen dessert products or single-service containers and/or closure products in the State of Alabama will expire at midnight on September 30, 2019.

The Alabama Milk Processor Fee Bill {Act 93-718} requires each plant that processes milk, milk products, frozen dessert products or manufactures single-service containers and/or closures for sale or consignment or for remuneration of any nature in a milk plant or frozen dessert processing plant shall annually obtain a permit from the Alabama State Board of Health prior to selling or offering for sale, consigning, consigning or offering for consignment, or offering for any remuneration such milk, milk products, frozen dessert products or single-service containers and/or closures in the State of Alabama. This requirement applies to any person who processes milk, milk products, frozen dessert products, or single-service containers and/or closures within or outside of the state and whose products are distributed within the state. This Bill/Act also provides for a $300.00 application fee to be submitted with the application. Please ensure that the check or money order is made payable for the correct amount. Per state auditor's instructions, any amount in permit fee over the listed fee will be considered a donation to the State of Alabama and will not be subject to a refund.

Please find enclosed an application for permit ADPH-FML 201a. The signed and dated permit application along with a check or money order made out to the Bureau of Environmental Services must be submitted to this department before September 30, 2019, so that your permit application can be reviewed and processed prior to issuing your permit for the 2020 permit year.

If you have any questions concerning the application form or fee, contact this office at 334-206-5375.

ABP/ap
Enclosure
ALABAMA DEPARTMENT OF PUBLIC HEALTH
Bureau of Environmental Services
RSA Tower, 201 Monroe Street, Suite 1250 • Montgomery, Alabama 36104 • 334.206.5375

APPLICATION FOR PERMIT FOR PROCESSING, HANDLING, MANUFACTURING OR DISTRIBUTION OF MILK, MILK PRODUCTS, FROZEN DESSERTS OR SINGLE-SERVICE CONTAINERS AND/OR CLOSURES

Application for a permit to operate and distribute products in the State of Alabama, effective October 1, 2019 through September 30, 2020.

Applicant's business structure is a (please check one):
☐ Corporation ☐ Limited Liability Company ☐ Partnership ☐ Individual/Sole Proprietorship (Total Number of Employees)

NATURE OF APPLICATION: Please check the appropriate box and provide the plant identification number.
☐ Grade A Pasteurization Plant – (Identification No.)
☐ Frozen Dessert Manufacturing Plant – (Identification No.)
☐ Single-Service Container or Closure Plant – (Identification No.)
☐ Manufacturing Grade Plant – (Identification No.)
☐ Frozen Dessert Mix for Resale – (Processing Location)
☐ Cheese Manufacturing – (Identification No.)

(PLEASE PRINT)
Legal Name of Firm: ____________________________
Address: ______________________________________ City: __________ State: ________ Zip: __________
Business Phone: __________ Fax: __________ Email: ______________________________

(Please complete ONLY if mailing address is different from above.)
Address: ______________________________________ City: __________ State: ________ Zip: __________

The name of the person to manage or in charge of the place of business of application:
Name: ____________________________ Title: ____________________________
Business Phone: __________ Fax: __________ Email: ______________________________

*Location of Alabama Distribution Stations:

*If partnership, corporation, or association, give the name of same and the name of officers on the reverse side of this form.

The following regulatory agency provides sanitation evaluation of the above facility:
Agency: ____________________________ Department: ____________________________
Address: ______________________________________ City: __________ State: ________ Zip: __________

I hereby certify that the above statements are true and correct, and I agree to comply with all provisions of the Alabama State Board of Health Rules governing the Production, Processing, Handling or Distribution of Milk, Milk Products, Frozen Desserts, and Single-Service Containers/Closures and hereby authorize the State Health Officer, or their representatives, to enter upon the premises of the above-named establishment for inspection purposes, and further promise that I shall give them such information pertinent to grading of the milk supply and the enforcement of the Rules as they may request.

Signature of Applicant: ____________________________ Title: ____________________________ Date: __________

ALABAMA DEPARTMENT OF PUBLIC HEALTH (ONLY)
Application Approved By: ____________________________ (Alabama Department of Public Health)
Date: __________ Permit Number: ____________________________ Date Issued: __________

Please return this form along with your check in the amount of $300.00 made payable to the Bureau of Environmental Services to the following:
Audra B. Phillips, Director
Alabama Department of Public Health
RSA Tower, 201 Monroe Street, Suite 1250
Montgomery, Alabama 36104

ADPH-FML 201a-Revision 8-1-17