

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF AGRICULTURE
BUREAU OF ANIMAL HEALTH AND DIAGNOSTIC SERVICES
 2301 North Cameron Street, Room 412
 Harrisburg, Pa 17110-9408

Telephone No: 717-772-2852

Fax No. 717-787-1868

APPLICATION FOR LICENSE TO OPERATE A
DOMESTIC ANIMAL GARBAGE FEEDING ESTABLISHMENT

I, hereby, make application for a license to operate a garbage feeding business in compliance with Act 100, as approved July 11, 1996, and the regulations promulgated by the Pennsylvania Department of Agriculture.

Date: _____

Fee: **\$100.00**

PLEASE NOTE: A fee of \$100.00 is required for each garbage feeding business to be operated by the applicant within this Commonwealth. Please make checks or money orders payable to the ***“Commonwealth of Pennsylvania”*** and remit along with the application to the address identified at the top of this form.

NAME OF ESTABLISHMENT: _____

MAILING ADDRESS: _____

TOWNSHIP: _____

COUNTY: _____

BUSINESS TELEPHONE NO: () _____ EMAIL _____

EXACT LOCATION OF FEEDING LOT: _____

DOMESTIC ANIMALS FED

SPECIES: _____ NUMBER: _____

PLEASE SEE NEXT PAGE

DESCRIBE IN DETAIL HOW YOU WILL COOK THE WASTE TO THE REQUIRED TEMPERATURE OF 212 DEGREES F FOR 30 MINUTES BEFORE FEEDING TO THE SPECIES LISTED PREVIOUSLY:

AUTHORIZED SIGNATURE FOR APPLICANT: _____

DATE: _____