APPLICATION PACKET

DEER PROCESSOR
HUNTER SHARE THE HARVEST
PROGRAM

Processing of wild caught and field dressed Deer ONLY, and not under USDA inspection

- Cover Letter & Mailing Addresses .................................................. Page 2
- Application for Custom Deer Processor ........................................... Pages 3 – 5 (Required)
- Guidelines – Self Inspection Checklist ............................................. Pages 6 – 7
FOOD ESTABLISHMENT REGISTRATION APPLICATION AND PLAN REVIEW
CUSTOM DEER PROCESSOR

As a participant in the Hunters for Sharing the Harvest program your deer processing establishment must be compliant with federal and/or state laws. Enclosed are the necessary forms and applications for obtaining a Registration from the Pennsylvania Department of Agriculture under the Food Safety Act of 2010 (3 C.S. §§5721 – 5737) as a custom Deer Processor. This registration application and inspection requirements has been specifically developed in partnership with and in consultation with the Hunters Sharing the Harvest Program's deer processor/directors Rick Fetrow, Kip Padgelek and Lorne Peters. Our goal is to minimize any inconvenience and make registration easy, while ensuring uniform food safety criteria and quality control in the future. Please note the integrity of the HSH venison charity is a foremost concern, and this change is a state requirement that will yield long-term positive benefits for you as a processor, as well as for the ultimate consumers receiving food assistance.

If your processing establishment is approved and inspected by USDA, US Department of Agriculture, and those same processing facilities are used for custom deer processing, you do not need Registered with the PA Department of Agriculture (PDA). Only facilities not inspected by USDA and who are providing custom deer processing services require registration and inspection by PDA. If any additional retail food store or food processing operation exists at this same establishment, please contact the Department to discuss proper licensing.

The enclosed material must be fully completed and returned to the appropriate Regional Office as listed below. Please note failure to provide all required information could delay your application approval. The Department of Agriculture, Regional Food Sanitarian and/or Supervisor, will review the application and contact you to if further information or clarification is needed, or if approved to schedule a registration inspection prior to your opening for operation. If your application is disapproved, you will receive a written letter stating the reasons for the application disapproval. Applications can be resubmitted at any time. Please allow 4 – 6 weeks for processing.

DO NOT SEND MONEY WITH THIS APPLICATION. Registration fees will be collected at the time of the Inspection. No Cash accepted. Checks or money orders ONLY payable to Commonwealth of PA. Initial registrations and annual renewals are $35.00

Sincerely,
The Bureau of Food Safety & Laboratory Services Staff

MAILING ADDRESSES: The Pennsylvania Department of Agriculture
Bureau of Food Safety and Laboratory Services

Followed by the address below:

Region 1 Clarion, Crawford, Elk, Erie, Forest, Jefferson, McKean, Mercer, Venango and Warren
13410 DUNHAM RD, MEADVILLE PA 16335 Phone: 814-332-6890 Fax: 814-333-1431

Region 2 Cameron, Clinton, Columbia, Lycoming, Northumberland, Montour, Potter, Snyder, Tioga and Union
542 COUNTY FARM RD, SUITE #102, MONTOURSVILLE PA 17754 Phone: 570-433-2640 Fax: 570-433-4770

Region 3 Bradford, Carbon, Lackawanna, Luzerne, Monroe, Pike, Sullivan, Susquehanna, Wayne and Wyoming
RT 92 SOUTH, PO BOX C, TUNKHANNOCK PA 18657 Phone: 570-836-2181 Fax: 570-836-6266

Region 4N/4S Allegheny, Armstrong, Beaver, Butler, Fayette, Greene, Indiana, Lawrence, Washington, Westmoreland
226 DONOHUE RD, SUITE 101, GREENSBURG PA 15601 Phone: 724-832-1073 Fax: 724-832-1013

Region 5 Bedford, Blair, Cambria, Centre, Clearfield, Fulton, Huntingdon, Juniata, Mifflin and Somerset
3001 FAIRWAY DR, ALTOONA PA 16602 Phone: 717-705-5500 Fax: 814-793-1869

Region 6E/6W Adams, Cumberland, Dauphin, Franklin, Lebanon, Lancaster, Perry, Schuylkill, and York
2301 N. CAMERON ST, ROOM G11, HARRISBURG PA 17110 Phone: 717-346-3223 Fax: 717-346-3229

Region 7 Berks, Bucks, Chester, Delaware, Lehigh, Montgomery, Northampton, and Philadelphia
1015 BRIDGE RD, COLLEGEVILLE PA 19426 Phone: 610-489-1003 Fax: 610-489-6119

REV 10.2019
FOOD ESTABLISHMENT REGISTRATION APPLICATION AND PLAN REVIEW  
CUSTOM DEER PROCESSOR  
This Application is intended for ONE establishment location.

As a registered Deer Processor, you may label your product or packaging, publications, advertisements, etc. with the following abbreviation “Reg. Penna. Dept. Agr.”

ESTABLISHMENT INFORMATION

NAME OF ESTABLISHMENT (Common public name): ________________________________________________________________

ADDRESS OF BUSINESS (LOCATION OF THE FOOD ESTABLISHMENT):

<table>
<thead>
<tr>
<th>Facility street number and name</th>
<th>City</th>
<th>State</th>
<th>Zip code</th>
</tr>
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County ........................................................................................................................................................................

(_______) ........................................................................................................................................................................

Facility phone number ........................................................................................................................................................

(_______) ........................................................................................................................................................................

Facility fax number ........................................................................................................................................................

(_______) ........................................................................................................................................................................

Facility email address ......................................................................................................................................................

Facility cell number or alternate phone number ........................................................................................................

MAILING ADDRESS (If Different Than Above):

<table>
<thead>
<tr>
<th>Street number and name</th>
<th>City</th>
<th>State</th>
<th>Zip code</th>
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PROPRIETOR/OWNER TYPE: ☐ SOLE PROPRIETOR ☐ CORPORATION ☐ NON-PROFIT OR ASSOCIATION ☐ PARTNERSHIP ☐ LIMITED LIABILITY CO. (LLC) OR PARTNERSHIP ( LLP)

LEGAL BUSINESS NAME (if different than establishment name): __________________________________________________________

LEGAL OWNER MAILING ADDRESS (if different than above mailing address):

<table>
<thead>
<tr>
<th>Owner street number and name</th>
<th>City</th>
<th>State</th>
<th>Zip code</th>
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(_______)........................................................................................................................................................................

Owner phone number ........................................................................................................................................................

(_______)........................................................................................................................................................................

Owner fax number ........................................................................................................................................................

(_______)........................................................................................................................................................................

Owner e-mail address ......................................................................................................................................................

Please fill in the detailed information on owner / proprietorship on page 7 of this application.

WATER, SEWER, WASTE INFORMATION

Issuance of a Food Establishment Registration in no way implies that this Establishment is compliant with any other state or local rules relating to water, sewer, zoning or building codes of any kind. It is the applicant responsibility to assure they are compliant with all other state or local rules and regulations.

WATER: The Establishment is using:

☐ A public / municipal water supply. Supplier: ________________________________ (ex: PA American Water Company)

☐ A non-municipal / private water supply (example: well water) regulated by DEP. These water supplies must be reviewed by DEP to determine if they are “public” water systems. DEP, Department of Environmental Protection, can be reached at 717-787-9633. Submit written documentation of DEP regulated public water supply, such as your assigned Public Water Supply (PWS) number. Change of owners must contact DEP to update information even if a PWS number exists for the facility.

☐ A non-public water supply (one not regulated by DEP). A coliform and nitrate/nitrate test must be completed and current. A copy of the results MUST be attached to this application (See Instructions for testing protocols).

REV 10.2019
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CUSTOM DEER PROCESSOR

SEWER: The Establishment is using:
☐ A municipal/public sewage disposal system. Name of Sewage Authority: _________________________________

☐ A non-public sewage disposal system (examples; Sand mounds, holding tanks). For on-lot sewage disposal systems, please contact the certified Sewage Enforcement Officer for your municipality and discuss if the current sewage disposal system is appropriate for your food establishment. This would not apply if the establishment is connected to an approved municipal supply, as listed above.

REFUSE/MEAT SCRAP DISPOSAL:
☐ The food establishment refuse (trash) collector will be: _________________________________ (company name)

☐ List any other Refuse or waste collection companies (ex: grease collection, food scraps, meat rendering, etc...): __________________________________________________________________________________________________________

OPERATIONAL INFORMATION

Which months of the year do you plan on processing? _________________________________

List which days of the week and times of day you will most likely be processing? __________________________________________

FLOOR PLANS for NEW DEER PROCESSORS

Although NOT required by Law, New Food Establishments that would like the Department to review and provide comments on plans for their establishment to assure compliance with Codes may voluntarily submit a blue print – or simple hand-draw sketch – of the proposed food processing establishment layout and a listing of proposed equipment. Simply attach your plans to this application.

HEALTH POLICY

As a food establishment providing a food processing services to the public, it is your responsibility to assure that you and any food workers are in good health and not ill with any illness that could be transmitted in food. Please have a plan in place to deal with times when you may not be feeling well but have processing jobs to do. An employee health policy establishes how to handle ill food workers, including you, during processing times.

ALL APPLICANTS READ AND SIGN

This application and all other requested materials, as listed above, should be submitted to your local Regional Office, as listed on the cover letter. Please allow 3-4 weeks for processing of your application from the date of post marking. You may be contacted by your regional Food Sanitarian requesting further clarification or information. The Food Sanitarian will contact you with final approval OR you will be sent a letter via USPS with disapproval, including the reasons, of this application. Next, an on-site inspection will occur. This must happen prior to registration and opening.
The Applicant understands and agrees that this document is an application for the Registration of a deer processing establishment only. The applicant understands and agrees that only a “proprietor” of this operation may obtain the registration; and that a “proprietor” may be a person, partnership, association or corporation operating the food establishment within the Commonwealth of Pennsylvania. The applicant verifies that the person or entity listed below is the “proprietor” of the food establishment that is the subject of this application. By signature on this application the proprietor confirms that the business is operating a deer processing establishment that has been approved by the local municipality with regards to any water, sewer, zoning or building codes requirements. Additionally, any other local, state, or federal rules and regulations that may be applicable are in compliance. The applicant verifies that all statements and information in this application are true and correct to the best of the applicant’s knowledge, information and belief; and makes these statements subject to the penalties of 18 Pa.C.S.A. § 4904, relating to unsworn falsification to authorities.

☐ INDIVIDUAL PERSON:

Signature

Legibly Print Name

Date

☐ PARTNERSHIP:

Signature – General Partner

Legibly Print Name

Date

☐ CORPORATION OR ASSOCIATION / NON-PROFIT ENTITY:

Name of Corporation or Non-Profit Entity

Name of current CEO/President/or similar

Official Title

Date of Birth of CEO/President/or similar

Signature of Corporate / Association / Non-Profit Official

Official Title of Signatory

Legibly Print Name

Date

☐ LIMITED LIABILITY COMPANY (LLC) OR LIMITED LIABILITY PARTNERSHIP (LLP):

Name of LLC or LLP

Name of Senior Official/General Partner, or Similar

Official Title

Date of Birth of Senior Official/General Partner, or Similar

Signature – Member

Date

Signature – Member

Date

Legibly Print Name

Legibly Print Name

OFFICIAL USE ONLY

LICENSE TYPE: ☐ RETAIL FOOD LICENSE – PERMANENT ☐ LICENSE EXEMPT – BUT INSPECTED

☐ APPROVAL

Approval date

Applicant contacted date

Method

☐ DISAPPROVAL

Disapproval date

Letter mailed to applicant date

Reasons for denial:

REVIEWING INSPECTOR:

*REMINDER: IN ALL CASES, A FACILITY RECORD MUST BE CREATED IN PAFOODSAFETY AND THE APPLICATION SCANNED AND ATTACHED TO THE FACILITY RECORD
SELF INSPECTION CHECKLIST
HUNTERS SHARE THE HARVEST DEER PROCESSORS

Personal Hygiene:
☐ There is a strict personal hygiene policy in place.
☐ Outer clothing worn while processing will be neat and free from any contamination. Dirty clothing, aprons, uniforms and similar are removed or replaced when they become overly soiled and could be a source of contamination of the meat.
☐ A handwashing sink with hot and cold running water, soap and paper towels is conveniently located in the processing area, is accessible at all times and used frequently.
☐ Hair restraint is worn by all persons accessing the processing area when processing is occurring.
☐ Disposable gloves are properly used when possible for processing.
☐ Hands are frequently washed throughout the day or anytime when they may have become contaminated.
☐ There is no smoking, eating or drinking in the processing or storage areas. This will only occur in designated areas that will not contaminate food or food contact surfaces.
☐ No employee or owner will handle or process food when ill with fever, diarrhea, or gastro intestinal illness or if diagnosed with a foodborne illness.
☐ Any cuts or lesions on the hands or arms will be effectively covered with an impermeable bandage and covered with a properly used glove.

Storage Temperatures:
☐ Refrigerators are all below 41°F.
☐ Freezers are holding all foods in a frozen state (Approximately 0°F).
☐ A thermometer is in place and functioning in every refrigerator or freezer.
☐ Temperatures are monitored frequently throughout the day.
☐ Temperature log sheets records are maintained and on file for review.

Meat Handling:
☐ Meat product is properly processed under sanitary conditions.
☐ All equipment for processing meat including cutting boards, knives, saws, grinders and similar have been properly cleaned and sanitized prior to use.
☐ Meat product is quickly packaged after processing and immediately stored under refrigeration.
☐ Diseased or damaged meat is not processed or used.
☐ By-product scraps are properly stored and disposed of in a manner not contaminating useable meat.
☐ Meat is protected from chemical hazards such as sanitizers, cleaners and similar.
☐ Meat is protected from physical hazards such as glass, acrylic fingernails, bandages, hair, dirt, unprotected light bulbs and similar.
☐ Meat is protected from biological hazards such as harmful bacteria, viruses, parasites, and fungus that would render the product unsafe for human consumption.

Cleaning and Sanitizing:
☐ A cleaning schedule is established for cleaning and sanitizing of all food and non-food contact surfaces.
☐ Cleaning of equipment NOT used in a cold room that is below 41°F is cleaned and sanitized every 4 hours.
☐ Cleaning of equipment stored and used in cold rooms (below 41°F) are cleaned and sanitized every 24 hours.
☐ Cleaners used are approved for food contact surfaces.
☐ All equipment properly sanitized with an approved sanitizer (Chlorine or Quaternary Ammonia) at safe concentrations.
☐ Test strips for sanitizers are available and used for testing of the sanitizer concentrations.
☐ All chemicals are properly stored, labeled and used.
**Pest Control:**
- ☐ The establishment is free of pests such as insect and rodents or similar.
- ☐ Measures are in place to prevent entrance of pests (screens, door sweeps, closed sealed doors).
- ☐ Pest monitoring is regularly occurring (such as glue boards or visual inspections).
- ☐ If needed, a current pest control service is contracted.
- ☐ Only a certified pest control operator shall apply any restricted use pesticides to my establishment.
- ☐ If used, pest control records are available for review.
- ☐ Use of glue boards or rolls, electrocuters, bug lights, rodent traps and similar are being done in a manner not to contaminate the meat or food contact surfaces.

**Overall establishment maintenance and operation:**
- ☐ The establishment is maintained in overall sanitary conditions.
- ☐ Unnecessary equipment or broken equipment is removed from the processing area.
- ☐ The processing area is maintained in a manner that allows it to be easily cleaned.

**Handling of Field Killed Game:**
- Field game may not be hung in a cooler or chill room prior to being skinned, thoroughly washed and cleaned out.
- Decomposed or otherwise unwholesome game may not be accepted for cutting or processing.
- The cutting and processing of game may only be conducted separately from that of livestock and carcasses. Cutting and processing of carcasses and meat derived from livestock must be finished prior to the introduction of game for cutting and processing. When the cutting and processing of the game is completed, the facilities and equipment must be thoroughly washed and sanitized prior to cutting and processing of other carcasses and meat.
- Any carcasses or meat found to be in contact with or have been contaminate by field killed game may be subject to disposal or detention by the Department.

*Please note that this checklist is not intended to be an all-inclusive list of items relating to food safety or to replace any regulatory requirements not mentioned herein.*