

# THE COMMONWEALTH OF MASSACHUSETTS

EXECUTIVE OFFICE OF ENERGY AND ENVIRONMENTAL AFFAIRS

**MPAS**



## Department of Agricultural Resources

100 Cambridge Street, 9<sup>th</sup> Floor, Boston, MA 02114  
www.mass.gov/agr



### APPLICATION FOR A PASTEURIZATION PLANT PERMIT

Application is hereby made for a permit to maintain an establishment of the  
PASTEURIZATION OF MILK

**FEE is \$100.00**

PLANT/BTU NO. \_\_\_\_\_

Under the name of \_\_\_\_\_

Located at \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

P.O. Box \_\_\_\_\_ Make of Pasteurization Equipment: \_\_\_\_\_

Type-Batch \_\_\_\_\_ H.T.S.T. \_\_\_\_\_ U.H.T. \_\_\_\_\_ Aseptic \_\_\_\_\_

Make of Flow Diversion Valve \_\_\_\_\_

Type of building construction \_\_\_\_\_

Number of rooms for handling and processing milk \_\_\_\_\_

Estimated quantity of milk to be pasteurized daily \_\_\_\_\_

Name of those persons selected for the operation of pasteurization equipment \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**THIS IS TO CERTIFY** that this establishments is in compliance with the regulations of the Massachusetts Department of Agricultural Resources relative to establishments for the pasteurization of milk outside of the Commonwealth and otherwise in accordance with the Massachusetts General Law Chapter 94, as amended

\_\_\_\_\_  
(Signature of Applicant)

**NOTE:** A permit to be issued as a result of this application, after an approved inspection has been made of the establishment.

**FEE is \$100.00. Payment to be made to the Commonwealth of Massachusetts.**

Mail To: Commonwealth of Massachusetts, P.O. Box 419168, Boston, MA 02241-9168

Date: \_\_\_\_\_ Telephone Number: \_\_\_\_\_