

South Dakota Certified Beef Processing Program

Governor's Office of Economic Development
711 E. Wells Avenue
Pierre, SD 57501
P: 800-872-6190
F: 605-773-3256



1. NAME AND ADDRESS OF ESTABLISHMENT: *(street, city and zip – no P.O. Box)*

2. INSPECTION/GRADING INFORMATION: *(check all that apply)*

State Inspected

Federally Inspected

Federally Graded

3. ESTABLISHMENT LICENSE NUMBER :

4. USDA PREMISE NUMBER:

5. DATE OF LAST STATE OR FEDERAL INSPECTION:

6. LEGAL STATUS:

Sole Proprietorship

Partnership

Corporation

LLC

Other (specify):

List partners/shareholders/members with a 10% or greater ownership interest:

7. OPERATIONS CONDUCTED: *(check all that apply)*

Harvest

Fabrication

Value-Added Processing (sausage, etc)

Distribution

Retail Sales

Custom Harvest/Processing

Branded Beef

List Branded Programs:

8. SPECIES HANDLED: *(check all that apply)*

Finished cattle

Hogs

Sheep

Buffalo

Cows/Bulls

Calves

Wild Game

9. LIST EMPLOYEES TRAINED TO APPLY STATE CARCASS QUALITY CERTIFICATION SYSTEM STANDARDS:

Ineligible Animals or Beef Product – Summary Suspension of License – Waiver of Prior Determination. The undersigned applicant acknowledges and agrees that individual animals or beef product may be deemed to ineligible to carry or be referred to in association with the “SOUTH DAKOTA CERTIFIED” name or logo if such animals or beef product do not conform to program requirements. Any such determination of ineligibility will not act to prohibit the sale of the ineligible animal or beef product provided they meet applicable state and federal food safety and related requirements, but such animals or beef product may not carry or be referred to in association with the “SOUTH DAKOTA CERTIFIED” name or logo. The undersigned applicant acknowledges and agrees that an animal or beef product may be deemed ineligible for program participation without any advance opportunity for the applicant to contest that determination. The undersigned applicant further acknowledges and agrees that a license granted under the SOUTH DAKOTA CERTIFIED beef program may be suspended without prior notice or opportunity to be heard if it is determined that the acts or omissions of the applicant (if licensed) have put the integrity of the program or the public health, safety or welfare at material risk of imminent harm. The applicant hereby knowingly and expressly waives any right applicant (if licensed) might otherwise have to prior determination of such matter, and applicant further waives any and all rights applicant (if licensed) might otherwise have to seek damages or other relief from any such determination.

The undersigned, on behalf of the applicant, and duly authorized so to do, agrees to the foregoing and attests that the information provided above by the applicant is accurate and complete.

MAILING ADDRESS OF APPLICANT:

TELEPHONE NUMBER:

E-MAIL ADDRESS:

PRINTED NAME:

TITLE:

SIGNATURE: _____

DATE:

FOR OFFICIAL USE ONLY

DATE: _____

RECOMMENDED ACTION: _____

PROGRAM COORDINATOR: _____

DIRECTOR OF SD MEAT INSPECTION PROGRAM: _____