

New York State
Department of Agriculture and Markets
Division of Milk Control and Dairy Services
10 B Airline Drive
Albany, New York 12235



SUPPLEMENTAL QUESTIONNAIRE TO IMPORT PERMIT
Application to ship Milk and Milk Products into New York State
FROM SOURCES LOCATED OUTSIDE OF THE UNITED STATES

(References in parentheses, unless otherwise noted, are to Part 2, Requirements for the Production, Processing, Manufacturing and Distribution of Milk and Milk Products.)

SUPPLEMENTAL QUESTIONNAIRE

A. PROCESSING PLANT (§2.2(bb); 2.3(a)) INFORMATION

NAME: _____

ADDRESS: _____

COUNTRY: _____

PHONE: _____ FAX: _____

WEBSITE: _____

B. PLANT PERSONNEL CONTACTS (with decision making authority) (§2.6(b))

	<u>NAME</u>	<u>TITLE</u>	<u>EMAIL</u>
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____

C. NAME AND ADDRESS OF GOVERNMENTAL AGENCY RESPONSIBLE FOR PLANT: _____

1. IF AGENCY ABOVE ISSUES A PERMIT OR LICENSE, PLEASE ATTACH A COPY.
2. ARE ROUTINE HYGIENE AUDITS OR SANITARY INSPECTIONS CONDUCTED? NO _____
 IF YES, LIST FREQUENCY OF INSPECTIONS AND PROVIDE A COPY OF THE MOST RECENT AUDIT OR INSPECTION REPORT _____
3. LIST PRODUCTS THAT ARE INTENDED TO BE IMPORTED INTO NEW YORK STATE.
 IDENTIFY THE FREQUENCY OF PRODUCT SAMPLING (§2.7).
 LIST WHO EMPLOYS THE PERSON TAKING THE SAMPLES
 LIST NAME OF THE TESTING LABORATORY WHERE SAMPLES ARE ANALYZED
 LIST REGULATORY AGENCY THAT OVERSEES THE LABORATORY:
 (ATTACH SEPARATE SHEET IF NECESSARY)

D. ANIMAL HEALTH & SAFETY OF RAW MILK SUPPLY (PRE-PASTEURIZED MILK) (§§2.9 – 2.28)

NAME AND ADDRESS OF GOVERNMENTAL AGENCY RESPONSIBLE FOR FARM INSPECTIONS AND

ANIMAL HEALTH: _____

1. RAW MILK SUPPLY FROM HERDS THAT ARE TESTED ANNUALLY FOR (§2.58):

TUBERCULOSIS? YES ____ NO ____
BRUCELLOSIS? YES ____ NO ____

2. RAW MILK SUPPLY FROM HERDS THAT ARE CERTIFIED (§2.58):

FOOT AND MOUTH FREE? YES ____ NO ____
RINDERPEST FREE? YES ____ NO ____

IF YES, FOR ANY RESPONSE IN 1 OR 2 ABOVE, PLEASE ATTACH RECORDS CERTIFYING COMPLIANCE.

3. ARE BOVINE BASED PROTEINS SUCH AS BONE, MEAT OR BLOOD MEAL FED TO DAIRY CATTLE FROM WHICH RAW MILK IS DERIVED? (Part 257, § 257.25) YES ____ NO ____

4. IS ANIMAL FEED REQUIRED TO BE LABELED? (Ag&Markets Law, Article 8) YES ____ NO ____

5. ANIMAL DRUG RESIDUE REGULATIONS (§2.2kk; 2.3(a)(2)(iv); 2.3(a)(4); 2.3(a)(7); 2.7(b); 2.8)

ARE DRUG RESIDUE TESTS RUN ON ALL INCOMING LOADS OF PREPASTEURIZED MILK?
YES ____ NO ____

LIST SPECIFIC DRUGS, TOLERANCES, AND TEST METHODS USED. _____

IS THE TESTING LABORATORY CERTIFIED BY A REGULATORY AGENCY? YES ____ NO ____

WHAT IS THE PRODUCER TRACE BACK PROCEDURE AND PENALTY WHEN SAMPLES ARE FOUND TO BE POSITIVE FOR DRUG RESIDUE? _____

E. PRODUCT INFORMATION (Part 17; 21CFR Part 101)

1. NAME & DESCRIPTION OF EACH PRODUCT TO BE IMPORTED: _____

2. LIST INGREDIENTS IN DESCENDING ORDER: _____

3. LIST ALL DAIRY INGREDIENTS (MILK, NONFAT MILK POWDER, WHEY, ETC)

<u>PRODUCT</u>	<u>MANUFACTURER</u>	<u>ADDRESS OF MANUFACTURER</u>	<u>COUNTRY OF MILK SOURCE</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

F. PROCESS DESCRIPTION (§§2.44 – 2.48)

1. TYPE OF HEAT TREATMENT: _____ (HTST, VAT, ASEPTIC, UHT, OTHER)
2. PROCESS TIME / TEMPERATURE (MINIMUM) _____ °F or °C _____ SECONDS or MINUTES
3. MANUFACTURER OF PASTEURIZATION EQUIPMENT: _____
4. MANUFACTURER & DESCRIPTION OF FLOW DIVERSION SYSTEM: _____

(NOTE: IF MORE THAN 1 PASTEURIZATION SYSTEM, PLEASE ATTACH SUPPLEMENTAL PAGES)

G. PACKAGING MACHINES (§2.50; 2.51)

<u>MANUFACTURER</u>	<u>TYPE OF CONTAINER</u>	<u>MFG OF CONTAINER/CLOSURE</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

H. PLANT WATER SUPPLY (§2.35)

PUBLIC: ____ PRIVATE DRILLED WELL: ____ OTHER: ____ DESCRIBE: _____

IS PLANT WATER TESTED: YES ____ NO ____

IF YES, LIST FREQUENCY OF TESTING AND LABORATORY CONDUCTING TESTS: _____

DESCRIBE TEST METHOD: _____

I. SUPPLEMENTAL INFORMATION

PLEASE INCLUDE THE FOLLOWING ITEMS WITH THE QUESTIONNAIRE:

1. PLANT BLUEPRINT (§2.64)
2. PROCESS FLOW DIAGRAM (HACCP (Hazard Analysis Critical Control Point) -TYPE BLOCK DIAGRAM)
3. PIPING SCHEMATIC FOR PROCESSING AREA THAT INCLUDES GRADE-A PRODUCT (§2.38; 2.43(b); 2.44)
4. PASTEURIZER DIAGRAM (PROCESS & INSTRUMENTATION DIAGRAM) MUST INCLUDE A DESCRIPTION OF PASTEURIZER ELEVATION RELATIVE TO BALANCE TANK, FLOW DIVERSION RETURN LINE, AND OTHER EQUIPMENT (§§2.44 – 2.48).
5. PHOTOGRAGHS OF KEY PROCESSING EQUIPMENT (STORAGE TANKS, PASTEURIZER, FILLERS, BLENDING SYSTEM, AND ANY OTHER CRITICAL PROCESSING EQUIPMENT)
6. PROVIDE DETAILS FOR THE SEPARATION OF GRADE A PRODUCTS EXPORTED TO THE UNITED STATES AND THE NON-GRADE A PRODUCTS WITHIN THE SAME PLANT. INDICATE TANKS USED, FILLERS, PACKAGING EQUIPMENT, PROCESSING LOGIC CONTROL, ETC.
7. HACCP PLAN (IF AVAILABLE)
8. PRODUCT LABEL (PROVIDE COMPLETE LABEL FOR EACH PRODUCT) (Part 17, 21 CFR Part 101)
9. PROVIDE A COMPLETE ENGLISH LANGUAGE COPY ALL LAWS AND REGULATIONS ADMINISTERED BY RESPONSIBLE GOVERNMENTAL AGENCY FOR THE FOLLOWING SUBJECT AREAS:
 - A. MILK PLANT HYGIENIC OR SANITATION
 - B. DAIRY FARM HYGIENIC OR SANITATION
 - C. ANIMAL HEALTH
 - D. MILK AND MILK PRODUCTS STANDARDS OF IDENTITY
 - E. LABELING FOR ANIMAL FEED