

Application for a Goat Bulk Tank Milk Grader

Pursuant to the *Milk Act* (R.S.O. 1990,
c.M12), and Regulation 761

Fields marked with an asterisk (*) are mandatory.

Note: If you have completed the Bulk Tank Milk Grader course, attach a copy of the "Letter of Achievement".

Type of Application *	Apprentice or Certificate Number (if applicable)	Expiry date of current Certificate (yyyy/mm/dd) (if applicable)
<input type="checkbox"/> New <input type="checkbox"/> Renewal		

1. Applicant

Last Name *	First Name *	Middle Initial
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Mailing Address

Unit Number	Street Number *	Street Name *	PO Box
City/Town *	Province *	Postal Code *	
Telephone Number *	Email Address		

Dairy Experience (including relevant courses)

Date of Completion of Bulk Tank Milk Grader Course or Date of Next Available Course

[Course information](#) available from Dairy Farmers of Ontario at www.milk.org or contact them at questions@milk.org.

Date (yyyy/mm/dd)

2. Employer Contact Information

Contact Name

Last Name *	First Name *	Middle Initial
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Mailing Address

Unit Number	Street Number *	Street Name *	PO Box
City/Town *	Province *	Postal Code *	
Telephone Number *	Extension	Email Address	

Current Duties

3. Declaration

Notice of Collection of Personal Information

Personal information on this form is collected as it is necessary for the proper administration of section 88 of R.R.O. 1990, Regulation 761: Milk and Milk Products under the *Milk Act*, R.S.O. 1990, c. M.12. It will be used for the purpose of issuing a certificate to act as a Goat Bulk Tank Milk Grader, including contacting the applicant. Questions about the collection should be directed to the Inspection Programs Unit at dairyfoodsafety@ontario.ca.

As part of providing accessible service, you can also contact the Agricultural Information Contact Centre (AICC) at 1-877-424-1300 or by e-mail at ag.info.omafra@ontario.ca if you require this information in alternate formats.

I certify that the information submitted in this application is true and correct to the best of my knowledge. *

Name (First and Last Name) *	Date (yyyy/mm/dd) *
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For mail submission, send completed form and support documents to: Director, Ministry of Agriculture, Food and Rural Affairs, Food Safety Inspection Delivery Branch, Inspection Programs, 1 Stone Road West, 5th Floor North West, Guelph ON N1G 4Y2.