

0581-0126

**U. S. DEPARTMENT OF AGRICULTURE  
AGRICULTURAL MARKETING SERVICE  
DAIRY PROGRAMS**

**EQUIPMENT REVIEW REQUEST**

Applicant (Name and Address)		Party Responsible for Payment if other than Applicant (Name and Address) Confirmation Required (Letter or Fax) Received <input type="checkbox"/>	Equipment Located at (Name and Address)
Website			
Tax Identification No. (TIN)	Tax Identification No. (TIN)	Inspection Date(s) Requested:	
Contact	Contact	Contact	
Telephone	Telephone	Telephone	
Fax	Fax	Fax	
Type of Equipment:		Review for: <input type="checkbox"/> Dairy <input type="checkbox"/> Livestock and Poultry <input type="checkbox"/> 3-A Third Party Verification <input type="checkbox"/> Appeal	
Signature of Applicant	Date	Email	

**Domestic Inspection:**  
A minimum of thirty (30) working days notification is required to insure specialists have ample time to make arrangements for the trip. If specialists are unavailable, the next available date acceptable to all parties will be assigned.

**Foreign Inspection:**  
A minimum of forty nine (49) working days advance notice is required for any foreign travel. The 49 days will start from the date this request form is received by the Dairy Grading Branch. If specialists are unavailable, the next available date acceptable to all parties will be assigned.

Hotel accommodations (USDA Dairy must pay): \_\_\_\_\_ Best mode of transportation from airport (train, taxi, company pickup...): \_\_\_\_\_  
Does the Hotel accept Visa credit cards:  Yes  No

Mail or Fax this form for All Reviews to:

USDA/AMS/DAIRY PROGRAMS  
Dairy Grading Branch  
Design Review Section  
Room 2746 – South Building  
1400 Independence Ave. SW STOP 0230  
Washington, DC 20250-0230

Tel: 202 720-3171  
Fax: 202 720-2643

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**FOR OFFICIAL USE ONLY**

Date Received: \_\_\_\_\_ Specialist Assigned: \_\_\_\_\_  
Date Assigned: \_\_\_\_\_ Project Number (s): \_\_\_\_\_