According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information is 0579-0065. The time required to complete this information collection is estimated to average 1 hour per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

**OMB Approved**
0579-0065
EXP. Date
XX/XXXX

A license cannot (1) be issued, or (2) remain in effect, unless an inspection is made of the treatment (PL 96-468 and 9 CFR 166).

**U.S, DEPARTMENT OF AGRICULTURE**
**ANIMAL AND PLANT HEALTH INSPECTION SERVICE**

# GARBAGE TREATMENT FACILITY INSPECTION

| 1. LICENSE NUMBER *(If relicensing inspection, so state)* | 2. COUNTY | 3. STATE |
|---|---|---|
| | | |

INSTRUCTIONS – After inspection, distribute copies of this form as shown below. All items are to be completed.

| 4. NAME OF OPERATOR *(First Name, MI, Last Name)* | 5. NAME AND MAILING ADDRESS OF FACILITY |
|---|---|
| PHONE NUMBER ( _____) _____ | |
| 6. ADDRESS WHERE YOU MAY BE CONTACTED IN PERSON | 7. SOURCE(S) OF GARBAGE |

| For each item, "X" one column only indicating satisfactory, unsatisfactory, or not applicable. Explain deficiencies AND not applicable notation in item 27. | Satis. | Un-satits. | Not Appl. |
|---|---|---|---|
| 8. General sanitation of treatment area | | | |
| 9. Garbage cooked to time/temperature specifications | | | |
| 10. Untreated garbage not accessible to swine | | | |
| 11. Material associated with untreated garbage not accessible to swine | | | |
| 12. Drainage from untreated garbage not accessible to swine | | | |
| 13. Garbage cooking area not accessible to swine to swine | | | |
| 14. Pest control | | | |
| 15. Separate equipment for untreated/treated garbage | | | |
| 16. Cooking equipment | | | |
| 17. Separate containers for untreated/treated garbage | | | |

| For each item, "X" one column only indicating satisfactory, unsatisfactory, or not applicable. Explain deficiencies AND not applicable notation in item 27. | Satis. | Un-satits. | Not Appl. |
|---|---|---|---|
| 18. Containers for untreated garbage? a. Covered | | | |
| b. Leak-proof | | | |
| 19. Disposal of excess garbage | | | |
| 20. Health of all animal species | | | |
| 21. Cleaning and disinfection of vehicles. | | | |
| 22. Maintenance of records. | | | |

23. Feeding untreated garbage: ☐ UNKNOWN ☐ YES ☐ NO
*(If unknown or yes, explain in item 27)*

24. Type of cooking equipment: ☐ STEAM ☐ DIRECT FIRE

25. Date of last temperature check:

26. Means of agitation available ☐ YES ☐ NO
*(If required in steam equipment)*

27. EXPLANATION OF DEFICIENCY(IES) AND NOT APPLICABLE NOTATION(S) *(Cite item numbers, explain corrective measures necessary, and give due date(s) for correction.)*

If more space is needed, "X" ☐ and continue on reverse.

| 28. SIGNATURE OF INSPECTOR | 29. DATE OF INSPECTION | 30. SIGNATURE OF Licensee *(Signature indicates a copy of the completed inspection report has been received)* | 31. DATE |
|---|---|---|---|
| | | | |