



**APPLICATION FOR SPECIAL POULTRY PERMIT:
TO SLAUGHTER, PREPARE AND SELL
WHOLE RAW POULTRY**

MAIL APPLICATION TO:
Food Safety Program
P. O. Box 42591
Olympia, WA 98504-2591
Phone: 360-902-1876 Fax 360-902-2087
Email: foodsafety@agr.wa.gov

APPLICANT NAME AND MAILING ADDRESS:		PHYSICAL SITE LOCATION:	
OWNER NAME		COUNTY:	
TELEPHONE NUMBER	CELL PHONE	EMAIL	
Type(s) of poultry to be processed—Check all that apply: <input type="checkbox"/> Chicken <input type="checkbox"/> Turkey <input type="checkbox"/> Duck <input type="checkbox"/> Geese <input type="checkbox"/> Other(s):			
Firm operates as: <input type="checkbox"/> Individual <input type="checkbox"/> Partnership <input type="checkbox"/> Cooperative <input type="checkbox"/> LLC <input type="checkbox"/> Corporation			
List name and address of all partners and/or officers below:			
NAME	TITLE	ADDRESS (Include City, State, Zip Code)	
If corporate office is out of state, provide name & address of responsible individual authorized & residing in Washington State for this firm:			
NAME	PHONE		
ADDRESS		FAX	
EMAIL ADDRESS			

List Proposed Slaughter Dates for Each Type of Poultry:

Note:
Applicant must provide prior written notice to the Food Safety Program of any additions or deletions to slaughter dates previously reported at least one week before the change.

APPLICANT STATEMENT

I certify that the provided information is correct.

I understand this permit allows slaughter of 1000 or fewer poultry per calendar year to be sold only from my site location and directly to the consumer.

I am remitting the \$75.00 fee for a one-year permit

I am remitting the \$125.00 fee for a two-year permit and understand that I must provide at least six weeks prior to the second slaughter year:

- The second year slaughter dates
- If on a well, spring or other private water system, a copy of a passing bacteriological test conducted within sixty days of submitting the second year slaughter dates

Applicant
Signature: _____

Title: _____

Date: _____

Total Permit Fee Remittance: \$ _____

Checks returned by the bank will be charged a handling fee of \$25.00. (RCW 62A.3.515(a) and 62A.3.520.)

THE SPECIAL POULTRY PERMIT FEE IS:
\$75.00 for one calendar year
 or
\$125 for two calendar years
 Each permit expires December 31 of the
one-year or two-year permit period

CASHIER USE ONLY: **4104**

Special Permit - Attachment A

Poultry Slaughter/Preparation Site Diagram

Please provide a basic sketch of the poultry slaughter/preparation site. Your site diagram must clearly show the location of all poultry slaughter and preparation equipment, contact work surfaces, lighting, chilling equipment, equipment washing and sanitizing sinks or tubs, hand washing areas, rinse water and offal collection areas and poultry rearing areas. Also, include toilet location.

Everything illustrated on your site diagram must be clearly labeled.

Special Permit - Attachment B

Detailed Processing Steps or Flow Diagram

Please provide detailed description of your processing steps or a detailed process flow diagram. Begin with the kill step and end with the customer pick up of the birds. Include an explanation of how you are going to clean, sanitize and store your slaughter equipment. Also, include the source of your ice and your disposal procedures for the rinse water and offal.

Special Permit - Attachment C Water Supply Requirements

Please check () the type of water system used at your proposed slaughter site:

City Municipal Well Spring Other Private Water Supply

If you are on a public water supply (city or municipal water supply or water association), the water you are using meets all the requirements. Special permit applicants on any of these water supply systems do NOT need to test their water supply.

If you are on a well, spring or other private water supply your local county health or State Department of Health (DOH) must approve the water source. Water source approval means the structure (well, spring head, etc) used to deliver the water must meet the DOH drinking water quality standards. **Additionally the water must have an annual passing bacterial test conducted. A bacterial test must be conducted no more than sixty days before submitting your application to the department. (Copy of the results must be sent in with your Permit application)**

Those issued a two-year special permit must also submit a copy of the bacterial test results at least six weeks prior to your second year slaughter dates. The bacterial test must be conducted no more than sixty days before submitting your second year slaughter dates to the department.

Potable water may be hauled into the slaughter site as long as the water is of safe and sanitary quality (as defined above). The transport vessel that is used must be capable of maintaining the sanitary quality of the water.

Bacteriological Testing of Water

When water samples are taken for bacteriological analysis, the water must be sampled from the furthest end of the water distribution system. To sample your water you must get sterile water testing bottles from the laboratory that you use to test the water. Your County Health Department either will have a lab for water testing or can help you find a local certified laboratory. The water sampling bottles have sampling instructions with them. The Maximum Contaminant Level (MCL) for coliform is the presence of coliform in the water sample (WAC 246-291-320). A satisfactory bacteriological water analysis is required prior to issuance of a permit.