



Kansas Department of Agriculture

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APPLICATION FOR MILK TANK TRUCK CLEANING AND/OR SANITIZING PERMIT

For Calendar Year of _____
January 1- December 31

Registration Fee
\$100.00

_____ New
_____ Renewal

Station Name _____

Location/Street Address _____

_____ City

_____ State

_____ Zip Code

_____ Phone Number

_____ County

_____ Federal Tax ID

Mailing Address (if different than above for letters and renewal purposes)

Is this station: Cleaning and Sanitizing _____

 Sanitizing Only _____

Is this station connected to another business? Yes _____ No _____

If yes, please show under what name station will be operated.

DBA (Doing Business As) _____

Name of station operator _____

I am familiar with the requirements of the Kansas dairy laws that apply to this license. I affirm that I will comply with the requirements of the Kansas dairy law and that I will conduct business in a lawful manner.

Signature of Owner or Manager

Date

For Office Use Only

ID _____

Issue Date _____

Revised 03-18