MINNESOTA DEPARTMENT OF AGRICULTURE
625 Robert St. N., St. Paul, MN 55155-2538
www.mda.state.mn.us

Dairy and Food Inspection, Ph: 651-201-6027, Fx: 651-201-6116 M.S. 32.394, Subd. 4

Application for Milk Handling Equipment and Facility Construction Review

- Minnesota regulations require **detailed plans** for all new and/or modified pipeline systems, milkhouses, milking barns, stables or parlors to be submitted for review prior to installation or modification *(PMO Item 9r and Section 12)*.
- Only plans that are complete and legible will be reviewed.
- The local inspector will inspect and verify these plans at the facility.
- **This application must be accompanied by a detailed legible drawing of the milking system (drawn to scale if possible) showing the following items, when present:**

1. Bulk Milk Tank
2. Double Wash Vats
3. CIP Pipeline Vat
4. Hand Wash Sink
5. Floor Drain
6. High Point
7. Vacuum Test Port
8. Air Injector
9. Receiver Group
10. Weigh Jars
11. Pipeline Inspection Port
12. Milk Pre-cooler
13. Filter
14. Filter Dispenser
15. Vacuum Pump
16. Wash Flow direction
17. Wash Manifold
18. Pressure Tank
19. Reclaimed Water Tank
20. Backflow Prevention Device
21. Air Gap Connection

PRODUCER INFORMATION

NAME		
DBA (FARM NAME)		
MAILING ADDRESS		
CITY	STATE	ZIP
COUNTY	TOWNSHIP	SECTION#
PRODUCER'S SIGNATURE ✗		DATE

INSTALLER INFORMATION

NAME		
EMAIL ADDRESS		
MAILING ADDRESS		
CITY	STATE	ZIP
INSTALLER'S PHONE		
INSTALLER'S SIGNATURE ✗		DATE

DAIRY PLANT NAME	PLANT LOCATION	PLANT NO.	PATRON NO.
INSPECTOR NAME			

MILKING ANIMAL	❑ Cow ❑ Goat ❑ Sheep ❑ Other _____		
EQUIPMENT INSTALLATION	❑ New ❑ Modification	**FACILITY CONSTRUCTION**	❑ New ❑ Modification
TYPE OF EQUIPMENT	❑ Bulk Tank ❑ Silo ❑ Pipeline Milking System ❑ Pre-cooler ❑ Direct Load Tanker ❑ Robotic Milking System (AMI) ❑ Other _____		
TYPE OF FACILITY	❑ Stanchion Barn ❑ Milking Parlor ❑ Swing Parlor ❑ Flat Barn Parlor ❑ Milkhouse ❑ Water Supply System ❑ Other _____		

MILKLINE

1. Material(s):	7. Percent Slope: ❑ 0.8% (1 IN/10 FT) ❑ 1.0% (1¼ IN/10 FT) ❑ 1.2% (1½ IN/10 FT) ❑ 1.5% (2 IN/10 FT) ❑ 2.0% (2½ IN/10 FT)
2. Diameter:	
3. Length:	
4. Lines are: ❑ WELDED ❑ GASKETED	8. ❑ HIGH LINE ❑ LOW LINE
5. Number of units:	9. Max. ht. from cow platform:
6. Max. units per slope:	10. Units washed in: ❑ PARLOR ❑ MILKHOUSE

MILK RECEIVER

1. Number of receiver inlets:	4. Located in pit?: ❑ YES ❑ NO *If yes,* are separate drains available? ❑ YES ❑ NO
2. Size of receiver inlet(s):	
3. Size of receiver vacuum inlet:	5. Located in a room other than the milkhouse? ❑ YES ❑ NO

VACUUM SYSTEM

1. Main airline: MATERIAL: DIAMETER: LENGTH:
2. Pulsator line: MATERIAL: DIAMETER: LENGTH:
3. Automatic drains in pulsator lines?: ❑ YES ❑ NO
4. Vacuum pump(s): BRAND: MODEL(S): MOTOR HP:
5. Total vacuum pump capacity: CFM/ASME AT NORMAL OPERATING LEVEL OF _____IN HG:
6. Vacuum regulator: BRAND: MODEL:
7. Other (SPECIFY):

MILK COOLING AND STORAGE SYSTEM

1. **Pre-cooler:** ❑ PLATE ❑ TUBE ❑ OTHER:_____
   Coolant: ❑ WELL WATER SINGLE USE ❑ RECIRCULATED WATER ❑ RECIRCULATED GLYCOL-TYPE OF COOLANT PRESERVATIVE USED:_____
   Number of sections in plate cooler:_____ Does each section freely drain?: ❑ YES ❑ NO
   Is it appropriate backflow prevention device properly located?: ❑ YES ❑ NO
2. **Bulk milk tank or silo:** BRAND: MODEL: CAPACITY: DATE OF MANUFACTURE:
   Bulk milk tank or silo: BRAND: MODEL: CAPACITY: DATE OF MANUFACTURE:
   Bulk tank temp recorder provided? (REQUIRED ON TANKS MANUFACTURED AFTER 1/1/2000): ❑ YES ❑ NO Type?: ❑ CHART ❑ COMPUTER
3. **Type of cleaning:** ❑ MANUALLY CLEANED ❑ CIP
4. **Is there a physical separation** of the wash system from the milk tank during storage?: ❑ YES ❑ NO
5. **Distances** from bulk milk tank to walls, ceiling, and equipment provided on plan? (Required Information) ❑ YES ❑ NO
   Direct-ship operations require a supplemental application

CIP MILKING SYSTEMS (AMI)

1. Is the water heating system adequate for all milking operations?: ❑ YES ❑ NO Capacity? _____gallons
2. Is there a physical separation of the wash system lines from the Milking System during milking?: ❑ YES ❑ NO
3. Is there an effective cleaning/sanitizing procedure in place?: ❑ YES ❑ NO

ROBOTIC MILKING SYSTEM

1. The fresh air for the positive air ventilation system is from:
2. Is the positive air ventilation system automatically in operation whenever the AMI system is cleaning?: ❑ YES ❑ NO
3. Pre-cooler/chiller location:
4. Is there a recording device located downstream of the pre-cooler/chiller (where milk may be at its warmest) to monitor milk temperatures and wash cycles?: ❑ YES ❑ NO
5. How far from the milkhouse will the robot be located?:
6. Is the milk line between the robot room and the milkhouse properly sloped and accessible for inspection?: ❑ YES ❑ NO
7. Is the fresh water supply to the robot protected with an approved backflow protection device?: ❑ YES ❑ NO

MDA USE ONLY		DATE RECEIVED	APPLICATION NUMBER
REVIEWER	DATE	INSPECTOR	DATE
COMMENTS		COMMENTS	

Mail this application to:

Minnesota Dept. of Agriculture, Dairy & Food Inspection, Attn: Dairy Equipment Review, 625 Robert St. N., St. Paul, MN 55155