

Dairy and Meat Inspection Division, Phone: 651-201-6300, Fax 651-201- 6119

Dairy Product Label Review Submission Form

Dairy Product Label Review Submission Form

The Minnesota Department of Agriculture (MDA), pursuant to Minnesota Statutes 31.04 and 31.101, requires new dairy plants and existing dairy plants making a new dairy product to submit copies of dairy product labels to ensure the labels are in compliance with state and federal labeling regulations.

Trade secret information (as defined in Minn. Stat. § 13.37) submitted by an applicant is classified as private or nonpublic. In order to protect data as trade secret information, the application must identify the specific formula, pattern, compilation, program, device, method, technique or process that the applicant wishes to protect, and provide an explanation of the economic value of keeping the data from being generally known to other persons. Determining what constitutes trade secret information is ultimately the responsibility of the MDA, and the MDA cannot guarantee that data marked by an applicant as trade secret information will be classified as such.

Business Information								
Legal Name of Business:								
DBA:								
Address:								
City:			State: Zip:					
ounty:			Phone Number:					
Contact Information								
Submitter:								
Phone Number: Exten	sion:		Email Address:					
Secondary Contact:								
Phone Number: Exten	Extension:		Email Address:					
Label(s)								
Type of Product: Grade A Non-Grade A	Ν	lon Dair	ry l					
Product will be sold at (check all that apply):								
Grocery Stores Food Service / Restaurant Farmers' Market Seasonal Stands Online Orders								
Other:								
General			Grade A Product					
Is the following information on the product label?	YES	NO	Is the following information on the product label? YES NO					
Product Identity			Grade A					
Net Weight Statement			Pasteurized					
Ingredient List			Ultra-Pasteurized					
Business Name and Address			Non-Grade A Raw Milk Cheese					
Nutrition Facts Panel (If Required)			Is there a statement that the cheese was aged 60					
Plant Number*			days or more on the product label?					
Quality Assurance Statement*								
lf no,	YES	NO	Non-Grade A Ice Cream					
Is the product's shelf life over 90 days?			Is the Ice Cream Mix:					
Is the product aged?			Made by your firm					
Is the product frozen?			Purchased from another company					
*If the Plant Number and/or Quality Assurance State	ement	Made by another company at your firm's request						
are ink jetted, stamped or applied by other means onto the								
package, provide an example. The example can be attached to								
this form.								

Product Formulation. List all ingredients of product fo	rmula in order of predominan	ice.		
		Type of Ingredient Check appropriate box for each ingredient in formula		
Ingredient Name	Weight (lbs.) No Volumetric Measurements *The weight may be substituted with a range or percentage	Single Ingredient (ex. Milk)	Multi-Component Ingredient A compound product made up of more than one ingredient. For each multi-component ingredient, attach a copy, photo, or specification sheet containing the product name and ingredient statement listing all sub-ingredients. (ex. Chocolate Dairy Powder) 	
			YES	NO

All the items below must be provided with this submission. Written notification will be sent for all incomplete submissions. Labels will not be reviewed until the submission is complete. Please review your submission and check the boxes below to indicate items included with your submission.

Label Review Submission Form

Product label(s)

Completed ingredient list including product formulation (page 2 of this form)

Copies of multi-component ingredient labels

Submit this form with attachments to:

Minnesota Department of Agriculture,

Attn: Dairy Compliance Officer,

625 Robert St. N, St. Paul, MN 55155; or

Email application to dairylabels@state.mn.us