

APPLICATION FOR TESTER LICENSE

LICENSE NO. _____

Date _____ / _____ / _____

Complete the following form and submit along with proper payment. No application can be processed unless all information is provided.

Name _____

Address _____

City _____ State _____ Zip _____

Phone No. (____) _____

Mail to:
Creamery License Division, Purdue University
Poultry Science Building, POUL 211
125 S. Russell Street
West Lafayette, IN 47907-2042

TYPE OF LICENSE

	New	Renew
<input type="checkbox"/> Milk	\$30.00	\$15.00
<input type="checkbox"/> Cream	\$30.00	\$15.00
<input type="checkbox"/> Milk and Cream	\$60.00	\$30.00

TESTING METHOD

- | | |
|------------------------------------|-----------------------------------|
| <input type="checkbox"/> Automated | <input type="checkbox"/> Infrared |
| <input type="checkbox"/> Babcock | <input type="checkbox"/> Somatic |
| <input type="checkbox"/> Mojonier | |

Employer _____