



**DEPARTMENT of AGRICULTURE
and NATURAL RESOURCES**

PO BOX 2104
ALFRED DAIRY SCIENCE HALL
BROOKINGS SD 57007
PHONE: 605.688.MILK (6455)
danr.sd.gov

APPLICATION FOR LICENSE

Applicant Information

Applicant Name: _____

Street Address: _____

City: _____ State: _____ Zip: _____ Phone: _____

Employer's Name: _____

Employer's Address: _____

City: _____ State: _____ Zip: _____ Phone: _____

Application for

License Renewal New License

Type of License

_____ \$50 Dairy Field Representative cell number _____

_____ \$50 Milk & Cream Tester, Sample and Grader (Lab Technicians)

_____ \$50 Bulk Hauler

_____ \$50 Milk Sampler Only

Total Amount Remitted \$ _____

The department will issue or renew a license only after payment of the proper fees and satisfactory evidence of the applicant's ability to comply with the provisions of SDCL chapter 39-6 & 40-32 and the rules promulgated there under.

Please make this payment payable to the South Dakota Department of Agriculture and Natural Resources, and return this application form with your payment to:

**DANR Fiscal Division
523 East Capitol
Pierre, SD 57501**

Office Use Only: License # _____ Receipt # _____ Date _____