

## Town of Ridgeland

One Town Square · Post Office Box 1119 · Ridgeland, SC 29936

## **MEMORANDUM**

June 2, 2020

To: Town of Ridgeland Farmers Market Vendors

**Subject: Meat Vendors** 

<u>All vendors</u> who are selling meat or meat products (beef, chicken, lamb, poultry, etc.) <u>MUST</u> produce a valid certificate that is issued through the SC Meat Inspection Department before being able to sell at the Ridgeland Farmers Market. Vendors without a permit attempting to sell meat or meat products are in violation of state laws.

A copy of the permit application is attached to this memorandum for reference.

In order to obtain a permit application or should you have any questions, please call the Compliance Officer, Mr. Chris Helm at (803) 788-8747 or <a href="mailto:chelm@clemson.edu">chelm@clemson.edu</a> who can be reached 8:30 am – 4:30 pm Monday-Friday.

Their mailing address is:

South Carolina Meat-Poultry Inspection P.O. Box 201406 / 500 Clemson Road Columbia, SC 29224

Sincerely,

Town of Ridgeland

Example

## NOTICE OF REGISTRATION BY SCMPID REGISTRATION OF MEAT REGISTRATION DATE REGISTRATION NO. AND POULTRY HANDLERS Correct Vear SOUTH CAROLINA MEAT-POULTRY INSPECTION DEPARTMENT TITLE/SIGNATURE EXPIRATION DATE Post Office Box 102406 Followy Vean by 6-30-XX Columbia, SC 29224-2406 Investigator Phone: (803) 788-8747 FAX: (803)788-8114 E-Mail: CHELM@CLEMSON.EDU NOTICE TO MEAT AND POULTRY HANDLERS Unless you operate under USDA or South Carolina Grant of Inspection, you are required by law to register with the South Carolina Meat-Poultry Inspection Department, if you deal in meat or poultry products in or for intrastate commerce, (the term "intrastate" means commerce within this state). Reference 9 CFR 320.5 and 9 CFR 381.175 1. NAME AND MAILING ADDRESS OF REGISTRANT 2. PHYSICAL ADDRESS (If Different): (INCLUDE ZIP CODE): Name of Farm TELEPHONE ( ) E-MAIL 3. CHECK EACH TYPE OF BUSINESS YOU ARE ENGAGED IN: DISTRIBUTOR/WHOLESALER RENDERER ☐ WAREHOUSE ☐ ANIMAL FOOD MANUFACTURER Buying, selling, transporting, or importing any dead, dying, disabled, or diseased cattle, sheep, swine, goats, horses, mules, equines, poultry or parts of the carcasses of any such animals or poultry that died otherwise than by slaughter. 4. NATURE OF BUSINESS (Check All That Apply): ☐ MEAT OR MEAT PRODUCTS ☐ POULTRY OR POULTRY PRODUCTS ☐ BOTH MEAT & POULTRY PRODUCTS One or motiple Checked | POULTRY SLAUGHTER 5. TYPE PRODUCT: ☐ SHELF STABLE □ BOTH FRESH/FROZEN 6. OWNER OF BUSINESS: 7. BUSINESS REPRESENTATIVE'S NAME AND TITLE (Please Print): 9.DATE 8. BUSINESS REPRESENTATIVE'S SIGNATURE