



Arkansas Department of Agriculture  
 Animal Health Division  
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 Little Rock, AR 72205  
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 agriculture.arkansas.gov

## PERMIT FOR THE DISPOSAL OF INEDIBLE MATERIAL

**After denaturing or decharacterizing material,  
 complete sections below that apply to your company's situation.**

1. Material is picked up at the establishment (plant) \_\_\_\_\_  
*Company Name*

\_\_\_\_\_

*Company Address, City, State Zip*

Daily                       Weekly                      If Weekly, Number of Times: \_\_\_\_\_

2. Material is picked up by \_\_\_\_\_ of \_\_\_\_\_  
*Name* *Company/Farm Name*

for the purpose of feeding to \_\_\_\_\_ (species).  
*Animal Species*

3. Material is delivered by me to \_\_\_\_\_  
*Name of Person or Firm Receiving Material*

4. Material is disposed of by me without removal from the premises of my plant by:

Incineration                       Rendering

**This document remains valid until the method of disposal is altered.**

**Name of Plant/Company Requesting Permit:**

Company Name: \_\_\_\_\_

Company Representative: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Business Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

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**APPROVED**

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**State Authority:**

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**SIGNATURE** **TITLE** **DATE**

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