



# OFF-FARM MANURE/BEDDING VERIFICATION

Use this form to provide information on bulk off-farm manure and/or bedding materials. Have the supplier of your manure and/or bedding complete this form. *(Note: This form does not apply to packaged and labeled products.)*

I have provided \_\_\_\_\_ with \_\_\_\_\_  
(MOSA client name) (manure and/or bedding)

## SECTION 1: Off-Farm Manure Verification

**MANURE** Type of animals: \_\_\_\_\_

**Check manure type**

liquid manure  solid  semi-solid  dehydrated  pelleted  other: \_\_\_\_\_

Does the manure contain added ingredients (digesters, minerals, barn lime, etc.)?

No  Yes \_\_\_\_\_  
(list inputs added)

Does the manure contain \*bedding?

No  Yes \_\_\_\_\_  
(list type(s) of \*bedding in the manure)

Does the \*bedding contain added ingredients (materials for ammonia control, deodorizers, sanitizers, etc.)?

No  Yes \_\_\_\_\_  
(list inputs added)

\*If bedding is wood based, provide verification (below) that the wood shavings/sawdust come from raw and untreated sources.

**Manager Name (print)** \_\_\_\_\_

**Company/Farm Name** \_\_\_\_\_

**Address** \_\_\_\_\_ **City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_

**Phone** \_\_\_\_\_ **Email** \_\_\_\_\_

**Signature of Manager** \_\_\_\_\_ **Date** \_\_\_\_\_

## SECTION 2: Off-Farm Bedding Verification (Complete this section only if wood-based bedding is being used.)

**BEDDING** Type \_\_\_\_\_ Source \_\_\_\_\_  
(sawdust, wood shavings, etc.) (farm or company name)

Does the wood based bedding come from untreated sources?  No  Yes

If no, list wood source/ingredients: \_\_\_\_\_

**Manager Name (print)** \_\_\_\_\_

**Company/Farm Name** \_\_\_\_\_

**Address** \_\_\_\_\_ **City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_

**Phone** \_\_\_\_\_ **Email** \_\_\_\_\_

**Signature of Manager** \_\_\_\_\_ **Date** \_\_\_\_\_