

Michigan Department of Agriculture Plan Review Submission

*****please separate top portion of form from bottom; include top portion with MDA Plan Review Worksheet, Scaled Drawings, SOPs, and any other documents for the plan review process*****

Name of Business	
License No. (if you have one)	
Business Address (city, state, zip, county)	
Name of Business Contact	
Phone No. (include area code)	
Plan Review Region (check one box -- refer to map for region)	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7

**MAIL THIS PORTION WITH PLAN REVIEW DOCUMENTS ONLY TO ADDRESS BELOW:
 (DO NOT MAIL MONEY TO THIS ADDRESS; INDICATE MAP REGION # ON ADDRESS LABEL):**

Michigan Department of Agriculture
 Food and Dairy Division
 525 W. Allegan
 P.O. Box 30017
 Lansing, MI 48909

separate here



MDA PLAN REVIEW FEES ONLY

(SEND PLAN REVIEW DOCUMENT FEES ONLY TO ADDRESS BELOW)

*****separate bottom portion of form from top and mail bottom portion with invoice and fee of \$197.00 for MDA Mandatory Plan Review*****

Name of Business	
License No. (if you have one)	
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MAIL WITH CHECK OR MONEY ORDER PAYABLE TO:

Michigan Department of Agriculture
 Finance and Administrative Services
 P.O. Box 30776
 Lansing, MI 48909