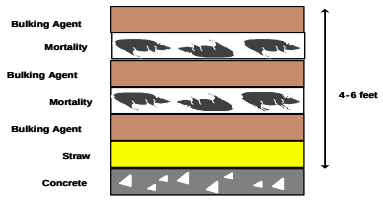

Batch
Start date
End date

Animal Tissue Composting Record

Farm Name:	**Farm Owner**	
Address:	**City:**	**Zip:**
County:	**Township:**	
Composting System (Bins, Windrow, Pile, Overlapping Piles, IV or combination thereof):		
These records must be maintained permanently. These records shall be made available to the director of the Department of Agriculture upon request. Batch temperature must be taken at least once each week.		

Date	Animal tissue added, lb	Age and specie	Bulking agent added, (yd^3 or lb)	√ if aerated (turned, mixed, moved)	Temp, °F	Disposal of finished compost (e.g. reuse in new batch, spread on field; provide specific details), yd^3 or lb or ton

Revised 1.18.08 D.W. Rozeboom