

RAINS NATURAL MEATS
23795 260TH STREET
GALLATIN, MO 64640
660 663 3674

January 7, 2013

USDA FSIS OFO
Paul Kiecker
Building B Suite 201
4700 S Thompson
Springdale, AR 72764

Dear Mr. Kiecker:

My name is David Rains and am the current manager of Rains Natural Meats in Gallatin, Missouri.

Our plant number is 20575. In the past we have processed beef, pork and some chicken. We have been under voluntary suspension since July 2012, due to health reasons of my brother who was managing the plant the last few years. The natural meat market has changed and has reduced our ability to compete. In September we agreed to a joint venture agreement with [REDACTED] to process horses as soon as regulations were changed to legalize the slaughter of horses in the United States.

We are applying for a grant of inspections for equine. I realize at this time if we are processing Horses we cannot process any other species. According to information from FSIS in Washington supplied to [REDACTED] those regulations might be changed at a later date. That is why I marked the other species on the form. I know at this time we cannot now process these species at the same time, but we might want to if regulations change at a later date. We have had a great working relationship with FSIS and look forward to reopening under Inspection in this new opportunity as soon as the regulations will allow it.

My cell phone number is 660-663-7101 and my home number is 660-663-3648 if you have any questions.

Thank you.



David Rains
Manager

Contacting Monday
☒
receiving grant.

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0583-0153. The time required to complete this information collection is estimated to average 10 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

U.S. DEPARTMENT OF AGRICULTURE
FOOD SAFETY AND INSPECTION SERVICE

100 years

Instructions: Submit this application to the District/Regional Office, Food Safety and Inspection Service, U.S. Department of Agriculture for import inspection requests. Complete all sections. If a section is not applicable, enter "N/A" or "None." If additional space is needed for any item, attach sheet and number the item.

APPLICATION FOR FEDERAL INSPECTION
(Meat, Poultry, Egg Product, Catfish and Import Inspection)

SECTION I. ESTABLISHMENT INFORMATION

1. Date of Application January 7, 2013	2. Type of Application <input type="checkbox"/> New <input type="checkbox"/> Change of Ownership <input type="checkbox"/> Change of Location <input checked="" type="checkbox"/> Application Extension
---	---

3. Type of Inspection Required (Check box) <input checked="" type="checkbox"/> Meat <input checked="" type="checkbox"/> Poultry <input type="checkbox"/> Egg Product <input type="checkbox"/> Import <input checked="" type="checkbox"/> Equine	4. Form of Organization (Check box) <input type="checkbox"/> Individual <input type="checkbox"/> Cooperative Association <input type="checkbox"/> Partnership <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> LLC
---	--

5. If Corporation, Name of State Where Incorporated Missouri	6. Address of Corporate Headquarters 23795 260th Street Gallatin, MO 64640	7. Date Incorporated 4-5-90
---	--	--------------------------------

8. Name of Applicant and Mailing Address (include zip code) Rains Natural Meats Div. of Pro Show Enterprises, Inc 23795 260th Street Gallatin, MO 64640	9. Federal Employer ID# [REDACTED]	11. Area Code and Telephone Number 660-663-3674
	10. Dun & Bradstreet # N/A	12. Firm's Code (Import Only) N/A

13. Actual Name of and Physical Address of Plant Rains Natural Meats 23795 260th Street Gallatin, MO 64640	14. Mailing Address if Different from Item 8 (include zip code) <i>NO GOES</i>	15. Area Code and Telephone Number 660-663-3674
---	---	--

16. Attach Limits or Establishment Premises to be under Federal Inspection (for egg plants attach blueprint)
Establish premises on file for Plant #20575

17. Name and Establishment Number of other official establishments located in the same facility Est 20575 P 20575	18. Doing Business As Rains Natural Meats
---	--

19. Month and Year when establishment will be ready to operate under inspection January 2013	20. Comments Presently under voluntary suspension
---	--

SECTION II. TYPE OF OPERATION

MEAT AND POULTRY INSPECTION ACTIVITIES (Check all that apply.)

21 A. Animals to be slaughtered when inspecting is inaugurated (meat and poultry only)

a. Beef Sheep Goats Swine Equine Chicken Turkeys Goose Ducks
 Guineas Squab Ratites

b. Raw - Ground (Non-Intact Products)

c. Raw - Not Ground (Intact Products)

d. Thermally Processed Commercially Sterile

e. Not Heat Treated - Shelf Stable

f. Heat Treated - Shelf Stable

g. Fully Cooked - Not Shelf Stable

h. Heat Treated but Not Fully Cooked - Not Shelf Stable

i. Product with Secondary Inhibitors - Not Shelf Stable

EGG PRODUCTS INSPECTION

MA

21 B. Check the type of product intended for inspection at the establishment (Check all that apply)

- a. Shell Egg Breaking
- b. Thermally Processed (Pasteurized heat treated)
 - Cans/Pails Flexible Pouches Jars Cartons Bag-n-Box Totes Tankers Other
- c. Not Heat Treated - Unpasteurized egg product only
- d. Heat Treated - Shelf Stable (Dried egg product, 50% Sugar Yolk)
- e. Heat Treated But Not Fully Cooked - not shelf stable (liquid and frozen egg products)

IMPORT INSPECTION

MA

21 C. Species (Check all that apply)

- Meat Poultry Egg Products Catfish

22. Check the type of product intended for inspection at the establishment (Check all that apply)

- a. Raw - Non-Intact
 - Ground Other Non-Intact
- b. Raw - Intact
 - Carcasses: Beef Veal Veal Hide On Goats Pork Lamb
 - Mutton Equine Poultry Ratites
 - Other: Cuts Boneless Manufacturing Meats Other Intact
- c. Thermally Processed Commercially Sterile
 - Cans Flexible Pouches Trays Jars
- d. Not Heat Treated - Shelf Stable
- e. Heat Treated - Shelf Stable
- f. Fully Cooked - Not Shelf Stable
 - Frozen from an APHIS restricted country (9CFR 94.4(b)) Frozen Perishable
- g. Heat Treated But Not Fully Cooked - Not Shelf Stable
- h. Product with Secondary Inhibitors - Not Shelf Stable
- i. Shell Eggs/Egg Products
 - Shell Eggs Liquid Frozen Dried

23. Mode of Transportation - Import Inspection Only (Check all that apply)

- Tankers Rail Cars Trucks Ocean Vessel Airline Other (Specify) _____

SECTION III OWNERSHIP AND MANAGEMENT INFORMATION

24. List all persons responsibly connected with the applicant. Include all owners, partners, officers, directors, holders or owners of 10 per centum or more of voting stock and employees in a managerial or executive capacity in the business. Notify the Division Director or import Inspection Division Director of any changes in the listing given.

Name and Title (Title - Indicate if partner or manager)	Present Home Address (Street and Number, City, State, Zip Code)	HOLDER OF 10% OR MORE VOTING STOCK (If Corp.)	
		YES	NO
David Rains, Manager	1104 S Prospect Gallatin, MO 64640	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Steve Rains, Partner	25505 St Hwy 6 Gallatin, MO 64640	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Don Rains, Partner	25505 St Hwy 6 Gallatin, MO 64640	<input checked="" type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>

25. Enter the name of each person listed under Item 24 who has been convicted in any Federal or State court of any felony. Enter the name of each person listed under item 24 who has been convicted in any Federal or State court of more than one violation of any law, other than a felony, based upon the acquiring, handling, or distributing of unwholesome, mislabeled, or deceptively packaged food or upon fraud in connection with transactions in food. Include the nature of the crime, the date of conviction and the court in which convicted. If none write "None."

N/A

26. List each conviction against the applicant (person, firm or corporation) in any Federal or State court of any felony. List each conviction against the applicant (person, firm or corporation) in any Federal or State court of more than one violation of any law, other than a felony, based upon the acquiring, handling, or distributing of unwholesome, mislabeled, or deceptively packaged food or upon fraud in connection with transactions in food. Include the nature of the crime, the date of conviction and the court in which convicted. If none write "None."

N/A

27. Sanitation Standard Operating Procedures have been developed for the establishment in accordance with §416.12 of the regulations. (Check one) YES NO

28. Applicant has been provided with a copy of this Privacy Act Notice. (Check one) YES NO

29. Typed Name of Person Signing Application David Rains	30. Signature 	31. Title Manager
---	---	----------------------

TO BE COMPLETED BY USDA, FSIS

32. Is this establishment presently under state inspection? (OFO only) YES NO

33. Is this establishment to be under Talmadge-Aiken Act? (OFO only) YES NO

34. Official Inspection Number Reserved 20575 P 20575	35. Signature of DM or IID Director	36. Date
--	-------------------------------------	----------