



PIG PROCESSING FORM

Halswell Butchery: 03 3228747 Email:brad@halswellbutchery.co.nz

Pig Source: (If domestically raised)

Name: _____

Address: _____

MPI declaration: I confirm that I have been involved in the day to day management of the animal(s) for at least 28 days. Signed: _____

Contact Name: _____ **Ph:** _____

Date: _____

Pack sizes: - Number of people packed for. _____

Reminder: There are 2 Shoulders/ Loins/ Bellies & Legs per pig.

Shoulders (2 options)

Rolled Pork	<input type="checkbox"/>	Sausages	<input type="checkbox"/>
Pickled Pork	<input type="checkbox"/>	Shoulder Bacon	<input type="checkbox"/>

Loin (2 Options)

Pork Chops	<input type="checkbox"/>	Rolled Pork Loin	<input type="checkbox"/>
Pork Rack	<input type="checkbox"/>	Pork Fillet	<input type="checkbox"/>

Belly

Belly x2	<input type="checkbox"/>	Pork Belly Roast	<input type="checkbox"/>
Belly Bacon	<input type="checkbox"/>	Pork Strips	<input type="checkbox"/>

Legs (2 Options)

Whole Ham (Raw / Cooked)	<input type="checkbox"/>	Fresh Pork Roast	<input type="checkbox"/>
Whole Ham cut in Half	<input type="checkbox"/>	Sausages	<input type="checkbox"/>
Pressed Ham (Sliced)	<input type="checkbox"/>	Mince	<input type="checkbox"/>

Small Goods

Cumberland Pork Sausages (Gluten Free)	<input type="checkbox"/>
Pure Pork Sausages	<input type="checkbox"/>
Salami	<input type="checkbox"/>

For pricing please refer to our [price list](#).