



Quality Hay Checklist

Hay Supplier: _____

Phone Number: _____

Initial Contact Date: _____

Hay Delivery Date: _____

Background on Hay Supplier			
How you located this supplier			
Type of hay (grass, legume, mix)			
Length of time in business			
Location of fields			
Reseed or fertilize fields			
Unusable hay			
Evaluation of Hay			
	Yes	No	Comments
Green and leafy	<input type="checkbox"/>	<input type="checkbox"/>	
Soft to touch	<input type="checkbox"/>	<input type="checkbox"/>	
Moisture content between 13 and 17%	<input type="checkbox"/>	<input type="checkbox"/>	
Smell musty, moldy, dusty	<input type="checkbox"/>	<input type="checkbox"/>	
Weeds, dirt, trash	<input type="checkbox"/>	<input type="checkbox"/>	
Insects or other vermin	<input type="checkbox"/>	<input type="checkbox"/>	
Other Criteria			
	Yes	No	Comments
If delivered, within a reasonable time frame	<input type="checkbox"/>	<input type="checkbox"/>	
Repurchase in the future	<input type="checkbox"/>	<input type="checkbox"/>	
Recommend to others	<input type="checkbox"/>	<input type="checkbox"/>	