Application to Register to do Business in Pickup, Removal, Transport, Storage or Manufacture of Food Animal By-Products or Dead, Dying, Disabled or Diseased Animals.

Registration/Permit No. ________________________________

I hereby make application to register my business as provided for in the Oklahoma Meat and Poultry Inspection Acts and Animal Health Rules and Regulations

Business Name: ______________________________________

Mailing Address: ___________________________________
(include zip code)

Location of Premises: __________________________________

Business Phone (include area code): _______________________

Check the type of business and give a brief explanation of your operation.

☐ Renderer  ☐ Grease Collector  ☐ Warehouse Storing Inedibles
☐ Grease Renderer/Blender  ☐ Animal Food Manufacturer  ☐ Transport Inedibles (Offal/Grease, etc.)
☐ Dead Animal Hauler  ☐ Collection Center

Business is: ☐ Individual  ☐ Partnership  ☐ Corporation

List name and address of each partner or corporate officer.

1. _________________________________________________
2. _________________________________________________
3. _________________________________________________
4. _________________________________________________

Name of operator if different than owner. _____________________________

I understand that my business will be subject to compliance reviews as provided by Oklahoma Statutes.

Signature __________________________________________ Date __________________________

Title __________________________________________ Print Name __________________________

Oklahoma Department of Agriculture, Food, Forestry offers its programs to all eligible persons regardless of race, color, national origin, religion, sex, age, or disability and is an Equal Opportunity Employer and Provider.