

Oklahoma Department of Agriculture, Food & Forestry
Office of General Counsel
PO Box 528804
Oklahoma City, OK 73152
Phone: 405/522-6302 FAX: 405/522-5789

Rev Code# 290 Amount Paid: _____
Card #: _____
Type of Card: ___ Master Card ___ Visa
Exp Date (MM/YYYY) _____
_____ Signature of Name on Card

Commercial Pet Breeders Application

Applicant: _____ Date: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____ Phone: _____

County: _____ Email Address: _____

Facility Name: _____

Physical Address: _____

City: _____ State: _____ Zip: _____ Phone: _____

County: _____ Email Address: _____

Operator (provide address, phone number and email address if different from applicant): _____

Facility Location (Must include driving directions from nearest municipality): _____

Legal Description of the Facility Location:

_____ ¼ _____ ¼ _____ ¼ Section _____ Township _____ Range _____ County _____

Sales Tax ID: _____ (unless only selling wholesale) If applicant is an entity, please provide name and address of registered agent: _____

Indicate total number of animals owned: Intact Females: _____ Males: _____ Juveniles: _____

Date of commencement of operation at this location: _____

List all Persons with an ownership of 10% or more: _____

License fees are as follows:

- One (1) to ten (10) intact female animals: \$125.00 (Voluntary)
- Eleven (11) to twenty (20) intact female animals: \$200.00
- Twenty one (21) to fifty (50) intact female animals: \$350.00
- Fifty one (51) to one hundred (100) intact female animals: \$500.00
- One hundred and one (101) or more intact female animals: \$650.00

Please indicate the following that apply:

- Been convicted of, or entered a plea of guilty or no contest, to any felony, or any crime involving animal cruelty, abuse or neglect.
- Received any adverse ruling from any court of competent jurisdiction or any administrative tribunal involving honesty, fraud, misrepresentation, breach of fiduciary duty, gross negligence, or incompetence in a matter related to animal sheltering, or cruelty to animals.
- Had an application for a license, registration, certificate, or endorsement related to animal sheltering or animal care denied or rejected by any state or federal licensing authority in Oklahoma or another state.
- Ever have revoked or suspended a license, registration, certificate or endorsement by an animal sheltering licensing board, kennel regulation board or similar agency.
- Ever surrendered a license, registration, certificate, or endorsement to the Board or any state or federal animal sheltering or kennel licensing authority, whether located in Oklahoma or elsewhere;

Please provide date, subject matter & court or government entity for any individual by which the above are marked and explain:

Oath of Accuracy

“I certify under penalty of law that this document and all attachments are to the best of my knowledge and belief true, accurate and complete. I am aware that there are significant penalties for knowingly submitting false, inaccurate, or incomplete information.”

Please Print Name and Title

Signature

Signed or attested before me this _____ day of _____, 20_____

(NOTARY SEAL)

Notary Public

My Commission Expires: _____

Affidavit of Lawful Presence

All natural persons fourteen (14) years of age or older and present in the United States, applying for a license with the Oklahoma Department of Agriculture, Food, and Forestry for a Commercial Pet Breeders or Shelter license are required by the provisions of 56 O.S. Supp. 2007 § 71, to provide the Oklahoma Department of Agriculture, Food, and Forestry with verification of lawful presence in the United States by executing one of the statements below.

I, _____ of lawful age, being first duly sworn, upon oath
(Print Applicant's Name)
states, under penalty of perjury as follows:

- I am a United States Citizen.
- I am a qualified alien under the Federal Immigration and Naturalization Act, and I am lawfully present in the United States.

Provide a copy of your Passport/Visa/Alien Registration document and write the number and expiration date.

Date

United States Citizen or Qualified Alien's Signature

Signed or attested before me this _____ day of _____, 20_____

(NOTARY SEAL)

Notary Public

My Commission Expires: _____