FERAL SWINE HUNTER LICENSE APPLICATION

Return to: Animal Industry Division, 2800 N Lincoln Blvd, Oklahoma City, OK 73105
O R Email to: Dana.Call@ag.ok.gov

Name: _____

Phone: _____ **Email Address:** _____

Mailing Address: _____ **City:** _____ **Zip:** _____

OKLAHOMA FERAL SWINE HUNTER LICENSES ARE VALID
JANUARY 1 TO DECEMBER 31 OF THE CALENDAR YEAR

_____

_____

Has the applicant(s) been convicted of a felony, misdemeanor, administrative, or civil violation of any natural resource requirements, including but not limited to forestry, fisheries, environmental, domestic, or wildlife animal health within the last 3 years in Oklahoma or any other jurisdiction? Or, has the applicant(s) had any equivalent license denied, revoked, or suspended by any authority, except in accordance with the provisions of 2 O.S. § 6-514?

☐ **Yes** ☐ **No**

If Yes, attach a list and description of all offenses.

Enclose $25.00 payment with application by check, money order, or credit card (see below).

Name on Card _____ **Expiration Date Month** _____ **Year** _____

Card No. _____ **Security Code** _____ **Amount** _____ ☐ **Visa** ☐ **Mastercard** ☐ **Discover**

"I, the licensure applicant, certify under penalty of law this document, all attachments, and information submitted are to the best of my knowledge and belief true, accurate, and complete. I am aware there are significant penalties for knowingly submitting false, inaccurate, or incomplete information, including the possibility of fines for each violation. Furthermore, I acknowledge that I have read and understand the Feral Swine Control Act and applicable administrative rules."

Signature of Applicant: _____ **Date:** _____

RETURN TO: ANIMAL INDUSTRY SERVICES
2800 N LINCOLN BLVD, OKLAHOMA CITY, OK 73105
FAX: 405 522 0756, EMAIL: Dana.Call@ag.ok.gov

FOR OFFICE USE ONLY

Approving Signature: _____ **DATE:** _____

Receipt # _____ **Amount** _____