GEORGIA DEPARTMENT OF AGRICULTURE
LIVESTOCK/POULTRY FIELD FORCES SECTION
AGRICULTURE BUILDING, ROOM 112
ATLANTA, GEORGIA 30334-2001

DO NOT USE THIS SPACE
License No. _____
Date Issued: _____
Voucher: _____
Amount:_____

Gary W. Black
Commissioner

APPLICATION FOR POULTRY SALES ESTABLISHMENT / POULTRY DEALER OR BROKER

□ **NEW** □ **RENEWAL**

In compliance with Georgia law relating to the Prevention and Control of Disease in Poultry (O.C.G.A. 4-4-80, et seq). and the Department of Agriculture Registration, License and Permit Act (O.C.G.A. 2-5-1, et seq), I hereby make application for license as: ( ) Poultry Sales Establishment ( ) Poultry Dealer or Broker (check appropriate license). I am enclosing my **$35.00** license fee. (My previous license number is _____)

If you do not have a NAIS Premises ID go to agr.georgia.gov for information or to apply online.

1) Name of Operation_____ NAIS Premis ID_____

2) Physical Address of Operation _____

Town: _____State: _____ Zip _____ County: _____

Telephone Number ( ) _____ Fax Number ( ) _____ E-Mail _____

3) Mailing Address of Applicant _____

Town: _____State: _____ Zip _____ County: _____

4) Please indicate nature of your operation by checking appropriate block:

_____Corporation _____ Partnership _____Individual _____Other

Name and address of corporation officers, partners or owner of this operation.

NAME TITLE ADDRESS

_____

_____

5) If the applicant operates in more than one location, names and locations of these businesses should be listed.

_____

As manager, owner, partner or stockholder, I am duly authorized to sign this application. I attest to the fact that the foregoing information documented on this application is true and correct.

_____ _____
Signature of Manager/Owner Date

_____
Title

_____
Print or Type Name of Signatory

Revised 7/01/10