

APPLICATION FOR AN OHIO LIVESTOCK DEALER'S LICENSE

(To be used by those dealers operating more than one place of business)

Name of Applicant _____ Business Address _____ City, State, Zip _____
 Type of Organization (Check One) Association, Corporation, Partnership, Individual, LLC, LLP, if Other (Specify) _____
 SS# / Tax ID# _____ DOB _____ County _____
 Telephone# _____ Cell Phone# _____ Fax# _____ E-Mail _____

Doing business and operating markets as follows: (Each location needs to have individual ADL-4 completed.)

NAME OF MARKET

LOCATION

NAME OF MARKET	LOCATION

List partners or, if corporation, give names, titles and addresses of officials and date of incorporation and state or origin where incorporated:

Name _____	Title _____	Address _____
Name _____	Title _____	Address _____
Name _____	Title _____	Address _____

Date of Incorporation _____ State Where Incorporated _____

Cumulative market dollar volume of livestock purchased in Ohio for your account and the accounts of others - Clause 2 - on the ten largest business days during the preceding calendar year.

1. \$ _____ 2. \$ _____ 3. \$ _____ 4. \$ _____ 5. \$ _____
 6. \$ _____ 7. \$ _____ 8. \$ _____ 9. \$ _____ 10. \$ _____

Cumulative market dollar volume of livestock sold for the accounts of others in Ohio on the ten largest business days during the preceding calendar year. (Commission or auction sales-Clause 1)

1. \$ _____ 2. \$ _____ 3. \$ _____ 4. \$ _____ 5. \$ _____
 6. \$ _____ 7. \$ _____ 8. \$ _____ 9. \$ _____ 10. \$ _____

The statements made herein and supplementary forms are true to the best of my knowledge and belief. I (we) agree to keep records for a period of sixty months or longer of the name and address of each person from whom I (we) acquire an animal and to whom the animal was disposed. The record will show the individual identification of each animal at the time of acquisition and disposal pursuant to section 943.14(B) of the Ohio Revised Code. I (we) also agree to permit the Ohio Department of Agriculture, or any of its authorized agents, to inspect my (our) records at any time, pursuant to section 943.14(A) of the Ohio Revised Code.

Signature of applicant or one authorized to sign: _____
Has any applicant(s) on this application ever been convicted of a felony?
 Yes No

Date application made: _____

A fee of ten dollars shall be paid for each licensed weigher.
 \$ _____ for license for market or yard
 \$ _____ for licenses covering weighers

New Applicant \$50.00 per annum
 For 1,000 head or less \$50.00 per annum
 For 1,001 to 10,000 head \$125.00 per annum
 For more than 10,000 head \$250.00 per annum

EQUAL OPPORTUNITY IN EMPLOYMENT AND SERVICES
 REFERENCES MAY BE REQUIRED BY THE OHIO DEPARTMENT OF AGRICULTURE

FOR OFFICE USE ONLY	
APPROVED	_____
CHECK #	_____
DATE OF CHECK	_____
AMOUNT OF CHECK	_____
DEALER LICENSE #	_____
WEIGHER LICENSE	_____
ISSUED DATE	_____

PAYMENT REQUIRED:

Total amount must be enclosed to cover the fee for the above license payable to the Ohio Department of Agriculture. Payment by check or money order only, all fees can be included in one check:

Payment Method: Check # _____ Money Order _____

Amount: \$, .