

Animal Health Division 1900 Kanawha Blvd E. Charleston, WV 25305-0170

1401-8542-8693-9776

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Application for Farmed Cervid Fac	cility License
Class I License \$375.00 Class II License	e \$750.00
WV Dept. of Agriculture/ Premises Farm ID Number:	FEIN Number:
WV Business Registration Number: Business Name:	
Applicants Name: Address:	
City: State: Zip: Count	ty:
Phone: Mobile Phone: Fax: _	
Web address: Email address:	
Location of Facility or Area:	
Business Hours:	
New Applicant ◊ Renewal Applicant ◊	
Total Number of Cevids by Species: Whitetail Elk Fallow Of	ther
Total Acres:	
I certify that I am not more than six months in arrears in any child support obligati 15. I also certify I am up-to-date on my Worker's Compensation and Unemployme by the terms and conditions of my license.	ions as outlined in the WV Code, Chapter 48, Article
Signature: Da	ate:
Mail this application, the current zoning of the facility and surrounding land copies of a map and WV Business License along with a check or money ord this is a renewal mail only the application, current inventory and new may of Agriculture, Animal Health Division, 1900 Kanawha Blvd E, Charleston, W 558-2231	ler in the correct amount made payable to: *If aps if pens have changed. West Virginia Dept.
WVDA Animal Health Inspector:	Approve ◊ Denied ◊
WVDA State Veterinarian:	Approve ◊ Denied ◊
Comments:	