		SE STATION NE 04333-0028 las, DVM
APPLICATIO	N FOR LIVESTOCK AN	D POULTRY DEALERS LICENSE
Please check one of the following:	• • • • • • •	
• Initial License • Renewal License	• I do not wish to renew (I	Please fill in Name and Address and return)
DATE:		
		NESS NAME:
ADDRESS:		ZIP CODE:
TELEPHONE NUMBER:		COUNTY:
EMAIL ADDRESS: Give below the names and address of	all Agents:	
	an Agents.	
NAME		ADDRESS
(List additional names and address on Indicate the registration number and d		other conveyance used in the transportation of livestock:
Indicate the registration number and d		r other conveyance used in the transportation of livestock:
		r other conveyance used in the transportation of livestock: <u>Description</u>
Indicate the registration number and d Plate Number and Registration	lescription of each truck or	
Indicate the registration number and d Plate Number and Registration Number	lescription of each truck of <u>Make</u>	<u>Description</u>
Indicate the registration number and d Plate Number and Registration Number	lescription of each truck of <u>Make</u>	<u>Description</u>
Indicate the registration number and d Plate Number and Registration Number Fee must be enclosed with the applica	Make <u>Make</u> ation \$25.00 per license	Description
Indicate the registration number and d Plate Number and Registration Number Fee must be enclosed with the applica each Agent, if any.	Make <u>Make</u> ation <u>\$25.00 per license</u>	Description
Indicate the registration number and d Plate Number and Registration Number Fee must be enclosed with the applica each Agent, if any.	Amount	Description
Indicate the registration number and d Plate Number and Registration Number Fee must be enclosed with the applica each Agent, if any. MAKE CHECK PAYABLE TO: <u>T</u>	Amount	Description Description (no matter how many plates you may need) - \$10.00 pe F MAINE enclosed: CHECK

PHONE: (207)287-3701

DEERING BUILDING 90 BLOSSOM LANE www.maine.gov/agriculture

FAX: (207) 287-5676