

**FOR OFFICE USE ONLY**

NEW COMPANY

NEW LOCATION

FIRM NUMBER \_\_\_\_\_

**DOING BUSINESS AS:**

Firm Name

Phone Number

Full Name of Applicant (Owner or Owners)

**MAILING ADDRESS (USE P.O. BOX, IF APPLICABLE)**

Street Number

City/Town

County

State

Zip Code+4

**LOCATION OF BUSINESS TO BE LICENSED**

Street Number

City/Town

County

State

Zip Code+4

Is this location a mobile unit?  No  Yes If yes, enter license plate number \_\_\_\_\_

Are you an online retailer?  No  Yes If yes, website? \_\_\_\_\_

Are you a distributor?  No  Yes

**MANAGER OR EMERGENCY CONTACT**

First Name

Last Name

Email

Primary Phone

Secondary Phone

**CHECK ONE**

Partnership

Corporation

Individual

Co-partnership

Limited Liability Company (LLC)

Other

Title of company representative responsible for compliance with the livestock drugs law

*Each holder of a license under this chapter shall keep a record, in the manner and form prescribed by the secretary, of each sale of a restricted drug by licensee. The record required pursuant to section 14328 shall include all of the following: a statement of the kind and quantity of the restricted drug sold, the date of sale, the name and address of the purchaser, and the signature of the purchaser.*

*The secretary shall revoke a restricted livestock drug license if the holder of such license has failed to keep the required record of sales of such drugs, or is not properly handling or storing such drugs.*

**I CERTIFY THAT THE INFORMATION CONTAINED IN THIS APPLICATION IS TRUE AND CORRECT.**

**SIGNATURE OF AUTHORIZED REPRESENTATIVE AND TITLE**

**TYPE OR PRINT NAME**

**DATE**

The fee for a restricted livestock drug license for each business location is fifty dollars (\$50). The license period is for the calendar year ending December 31. The law makes no provisions for reducing the fee for a fraction of a year. Submit application with fee made payable to:

Cashier, FLD  
California Department of Food & Agriculture  
P.O. BOX 942875  
Sacramento, CA 94271-2872

**DO NOT SEND COIN OR CURRENCY**

**DEPARTMENT USE ONLY**

RC Number

RC Date

Fee \$

Penalty \$

Application O.K