

**OHIO LIVESTOCK DEALER'S LICENSE APPLICATION FOR AN OPERATOR OF A CONCENTRATION YARD**

Name of applicant \_\_\_\_\_ Address \_\_\_\_\_ City, State, Zip \_\_\_\_\_  
 Doing business as \_\_\_\_\_ SS#/Tax ID# \_\_\_\_\_ DOB \_\_\_\_\_ County \_\_\_\_\_  
 Type of Organization (CIRCLE ONE) Association, Corporation, Partnership, Individual, LLC, LLP if Other Specify \_\_\_\_\_  
 Telephone # \_\_\_\_\_ Cell Phone # \_\_\_\_\_ Fax # \_\_\_\_\_ E-Mail Address \_\_\_\_\_  
 Day or Days of sale \_\_\_\_\_ Auction Start Time \_\_\_\_\_

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

Name \_\_\_\_\_ Title \_\_\_\_\_ Address \_\_\_\_\_  
 Name \_\_\_\_\_ Title \_\_\_\_\_ Address \_\_\_\_\_  
 Name \_\_\_\_\_ Title \_\_\_\_\_ Address \_\_\_\_\_  
 Date of Incorporation \_\_\_\_\_ State Where Incorporated \_\_\_\_\_

Will the applicant have any employee(s) working on their behalf?  Yes (please fill out an E-1 form and submit employee fee)  No

(Do not designate a clinic - must list names individually)

Name of veterinarian to be approved \_\_\_\_\_ Address \_\_\_\_\_  
 Name of alternate veterinarian \_\_\_\_\_ Address \_\_\_\_\_  
 Date of last scale test \_\_\_\_\_ Tested by \_\_\_\_\_  
 Total number of weigher licenses to be issued \_\_\_\_\_ Applications (AWL Revised 1/10) must be completed and attached.

Show in the table below the number of head of each class of livestock purchased, sold or exchanged at the above named market or yard during the preceding calendar year in Ohio.

**LIST NUMBER OF HEAD HANDLED DURING PRECEDING CALENDAR YEAR BELOW**

Species	Total number purchased in Ohio for own accounts and the accounts of others:	Total number sold in Ohio:
Cattle		
Veal Calves		
Sheep & Lambs		
Goats		
Swine & Other Suidae		
Horses & Other Equidae		
Poultry		
Alpacas & Llamas		
Total		

FOR OFFICE USE ONLY  
 DATE RECEIVED STAMP

List the dollar volume of livestock purchased in Ohio for your own account and the accounts of others on the ten largest business days during the preceding calendar year.

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

The undersigned hereby certifies that this report has been prepared by him/her or under his/her direction from his/her books and records, and that to the best of his/her knowledge and belief said report correctly reflects the operations of the dealer. I (we) agree to keep records for a period of sixty months or more 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.

Date application made \_\_\_\_\_

Signature of the applicant or one authorized to sign \_\_\_\_\_

**Has any applicant(s) on this application ever been convicted of a felony?**

Yes  No

New Applicant or 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 MAYBE REQUIRED BY THE OHIO DEPARTMENT

**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: \$   ,    .

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

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