

DOMESTIC ANIMAL HEALTH PERMIT SUPPLEMENT

IMPORTANT: In addition to being required to have a Domestic Animal health Permit to handle livestock, you may also be required to be licensed and bonded under Article 20 of the new York State Department of Agriculture & Markets or registered and bonded with the Packers & Stockyards Administration of the United States Department of Agriculture. **Please print answers to the following questions and be sure to sign and date the form. Incomplete forms will be returned and will delay the processing of your permit.**

_____	_____
(Name & Title)	(Business Name)
_____	_____
(Street Address)	(County)
_____	_____
(Town, State & Zip Code)	(Phone Number) (Cell Phone Number)

1. Please (X) the categories below that apply to you and indicate the dollar volume for the previous 12 months.

Category	Total Annual Volume Purchased	Total Annual Volume Purchased Directly from NY Producers
<input type="checkbox"/> Farmer, Producer, Commercial Production.....	\$ _____	\$ _____
<input type="checkbox"/> Heifer Raiser	\$ _____	\$ _____
<input type="checkbox"/> Cattle Dealer	\$ _____	\$ _____
<input type="checkbox"/> Horse Dealer: <input type="checkbox"/> Slaughter	\$ _____	\$ _____
<input type="checkbox"/> Pleasure	\$ _____	\$ _____
<input type="checkbox"/> Other Livestock Dealer	\$ _____	\$ _____
What species? _____		
<input type="checkbox"/> Packer Buyer	\$ _____	\$ _____
<input type="checkbox"/> Order Buyer	\$ _____	\$ _____
<input type="checkbox"/> Market Operator	\$ _____	\$ _____
<input type="checkbox"/> Auctioneer (Market Agency on Commission)	\$ _____	\$ _____
<input type="checkbox"/> Other, Explain _____		

***If you check the Auctioneer Category, indicate the dollar volume your commission was based on.**

- | | | |
|--|--------------------------|--------------------------|
| | YES | NO |
| 2. Are you Registered & Bonded with the United States Department of Agriculture | <input type="checkbox"/> | <input type="checkbox"/> |
| If no, are you in the process | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Are you Licensed & Bonded under Article 20 of the New York State Department of | | |
| Agriculture & Markets to handle farm products (includes livestock) from New York Producers? | <input type="checkbox"/> | <input type="checkbox"/> |
| If no, are you in the process? | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Do you buy and/or sell across state lines? | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. List specific places where you sell (i.e. New York Producers, Auction Markets, Stockyards, internet, etc.). | | |
| 6. List specific places where you buy (i.e. New York Producers, Auction markets, Packers, internet etc.). | | |
| 7. Do you buy for: <input type="checkbox"/> Your own use <input type="checkbox"/> Buy to resell <input type="checkbox"/> For others, please name _____ | | |
| 8. Do you deal in farm products other than livestock (i.e. hay, grain, eggs, etc.)? | <input type="checkbox"/> | <input type="checkbox"/> |

Signature _____
Date