

CITY OF MEMPHIS ANIMAL CONTROL

721 W ROBERTSON ST

MEMPHIS TX.79245

CITY HALL PH: 806-259-3001

ACO OFFICE PH: 806-259-2916

Livestock Premises Registration Application

Please return completed form to the address listed above.

A. Registrant information

Name of individual (first name, middle initial, last name) * OR legal name of business (or other legal entity) *		Registrant phone* ()	
All trade or other names* , if any (d/b/a or "doing business as")			County*
Mailing address*	City/Village/Town*	State*	Zip code*

B. Contact information List the name of the Primary Contact for the premises.

Primary contact name and phone number * – Fill in below.			
First Name	Middle Initial	Last Name	
Primary contact phone ()	<input type="checkbox"/> Home <input type="checkbox"/> Business <input type="checkbox"/> Cell <input type="checkbox"/> Pager	Backup Phone ()	<input type="checkbox"/> Home <input type="checkbox"/> Business <input type="checkbox"/> Cell <input type="checkbox"/> Pager
Alternate contact name and phone number – Fill in below (OPTIONAL).			
First Name	Middle Initial	Last Name	
Alternate contact phone ()	<input type="checkbox"/> Home <input type="checkbox"/> Business <input type="checkbox"/> Cell <input type="checkbox"/> Pager	Backup Phone ()	<input type="checkbox"/> Home <input type="checkbox"/> Business <input type="checkbox"/> Cell <input type="checkbox"/> Pager

C. Description of location*

Address of location			
City	State	Zip code	County

F. Types of livestock and how many on premises

Steer _____

Cow _____

Goats _____

Equine _____
(includes horses , mules , and donkeys)

pigs _____

Sheep _____

Poultry _____

Small Mammals _____
(includes rabbits , guinea pigs ,)

Are any of these animals for the 4-H livestock show if they are which ones

Photos must be attached this this livestock registration

A Notarized signed 300 foot waiver from surrounding neighbors within a 300 foot radius. This a must have and it needs to be attached to this livestock registration

All animals must have a Rabies Vaccination by a certified veterinarian and a copy of that rabies Certificate must be attached to this livestock registration.

G. Signature

Signature

Date

I declare that I have inspected the premises and everything meet the guidelines

Signature of authorized representative

Date

Print name of person signing

Title of person signing

Copy of the City Livestock ordinances are attached to this registration.

All City ordinance must be followed or it could result in the loss of your livestock registration