

FERAL SWINE TRANSPORTER LICENSE APPLICATION

Return to: Animal Industry Division, 2800 N Lincoln Blvd, Oklahoma City, OK 73105 Fax: 405-522-0756, Email: <u>Dana.Call@ag.ok.gov</u>

N			
	Cell Phone:		SS:
Mailing Address:		City:	Zip:
Physical Address (if differ	rent from than above):		
City:	Zip:	County:	
Driver's License Number	:		
Description of vehicle(s) a	nd tag number of vehicle(s) used to t	ransport feral swine:	
Location(s) where feral sy	vine are typically transported:		
resource requirement animal health within equivalent license do f 2 O.S. § 6-514? Yes No	been convicted of a felony, misdents, including but not limited to for the last 3 years in Oklahoma or a senied, revoked, or suspended by a senied description of all offenses.	restry, fisheries, environy other jurisdiction?	Or, has the applicant(s) had any
Enclose \$25	5.00 payment with application by	check, money order, o	or <u>credit card</u> (see below).
Name on Card		Expiration Da	te Month Year
ard No	Security Code	Amount	Visa Mastercard Discover
best of my knowledge an submitting false, inaccurate	nd belief true, accurate, and comple, or incomplete information, inclu	ete. I am aware there ading the possibility of	ents, and information submitted are to the are significant penalties for knowingly f fines for each violation. Furthermore, and applicable administrative rules."
ignature of Applicant:			Date:
	RETURN TO: ANIMA 2800 N LINCOLN BLVD, O FAX: 405 522 0756, EM	KLAHOMA CITY, OK	X 73105
	FOR OFFIC	CE USE ONLY	
pproving Signature:			DATE:

Amount

Receipt #