



2013 LIVESTOCK DEALER LICENSE APPLICATION

Please print clearly

Company Name: _____

Contact Name: _____

Civic Address: _____ Town: _____

Province: _____ Postal Code: _____

Phone: _____ Fax: _____

Mobile phone: _____ Email: _____

List all employees who may handle animals within your business and will be covered by this license (if you require additional space please attach list)

- 1. _____ 2. _____
3. _____ 4. _____
5. _____ 6. _____

I am hereby applying for a Livestock Dealer License under section 3 of the Nova Scotia Cattle Producers Regulations as related to sections 6 and 9 of the Natural Products Act. I have read the Board Notice attached to this application and I am agreeing to abide by the requirements for Livestock Dealers and Levy remittances. I understand that this license must be renewed every year as requested by the NSCP and I am including the licensing fee as prescribed by NSCP. Each license issued shall expire on December 31st each year.

(Print name)

(Signature of applicant)

Date: _____

For Office Use Only

Date Received: _____

Date Processed: _____

Date Mailed to Licensee: _____

Checked by (initials): _____