

Phone: 902-893-7455 | Fax: 902-893-7063 | Email: office@nscattle.ca

2025 LIVESTOCK DEALER / PROCESSOR LICENSE APPLICATION

Please print clearly:	
Company Name:	
Contact Name:	
Civic Address: ***If mailing address is different	Town:ent than civic address, please indicate mailing address on bottom of this form
Province:	Postal Code:
Phone:	Fax:
Mobile phone:	Email:
List all employees who may handle (if you require additional space, ple	e animals within your business and will be covered by this license ease attach list)
1.	2.
3.	4.
5.	6.
issued shall expire on December 3 I authorize NSCP to list my nar	1 st each year. ne on their website under the heading of licensed dealer.
(Print Name)	(Signature of Applicant)
Date:	
	License applications must include payment of \$100+HST before to fee for renewing the Dealer / Processor License if it is received
All cheques to be made payable to	the "Nova Scotia Cattle Producers"
For Office Use	Only
Date Received:	
Date Processed:	
Date Mailed to Licensee:	
Checked by (initials):	