



John McMillan  
Commissioner

**STATE OF ALABAMA**  
**DEPARTMENT OF AGRICULTURE AND INDUSTRIES**  
**STOCKYARDS & BRANDS SECTION**  
1445 Federal Drive · Montgomery, Alabama 36107-1123  
334-240-7304 · 800-642-7761 Ext. 7304

**LIVESTOCK DEALER PERMIT**  
*(Please print or type)*

Date: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

\_\_\_\_\_  
(City)

\_\_\_\_\_  
(State)

\_\_\_\_\_  
(Zip)

County: \_\_\_\_\_

Type of Organization: Individual ( ) Partnership ( ) Corporation ( )

Association ( ) Cooperative ( ) Other: \_\_\_\_\_

If corporation or association, designate date in which incorporated: \_\_\_\_\_

State of incorporation: \_\_\_\_\_

Owners, Partners, or Officers:

Name

Title

Address

Name	Title	Address
_____	_____	_____
_____	_____	_____
_____	_____	_____

If foreign (out of state) corporation or association, list those responsible for Alabama operations.

Name

Title

Address

Name	Title	Address
_____	_____	_____
_____	_____	_____
_____	_____	_____

List names of full-time employees who will be buying livestock for you under this license, and are not buying under any other dealer (and require an official authorization card). Only those persons listed below will be authorized to buy livestock for you under this license.

\_\_\_\_\_  
\_\_\_\_\_

List agents that are covered under another bond that are buying on commission for you.

\_\_\_\_\_  
\_\_\_\_\_

List markets or areas of Alabama where you will conduct buying operations.

\_\_\_\_\_  
\_\_\_\_\_

If others bought for you on a commission basis or other comparable method of compensation during the year ending October 31st, list buyer's name, total head bought, and total amount paid, for November 1<sup>st</sup> through October 31<sup>st</sup>:

NAME	(a) NUMBER	(b) AMOUNT
_____	# _____	\$ _____
_____	# _____	\$ _____
_____	# _____	\$ _____
_____	# _____	\$ _____
_____	# _____	\$ _____

If applicant has engaged in business during the year ending October 31st, report purchases for November 1 through October 31st as follows:

(a) Give the number of heads and total amount paid for livestock purchased on a dealer basis.

Number \_\_\_\_\_ Amount \$ \_\_\_\_\_

(b) Give the number of heads and total cost of livestock purchased for the account of others (order buying). This includes livestock you purchased which was billed direct to your customer by the seller and paid for by your customer.

Number \_\_\_\_\_ Amount \$ \_\_\_\_\_

If registered under U.S. Packers and Stockyards Act, give name and address as registered:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

(City)

(State)

(Zip)

Bonding Company: \_\_\_\_\_ Phone: \_\_\_\_\_

Bond Amount: \$ \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Have you ever failed to pay for any livestock purchased? YES ( ) NO ( )

Have you ever issued any checks or bank drafts in payment for livestock which have been returned unpaid or dishonored? YES ( ) NO ( )

Are you now involved in any legal proceedings that involve your financial obligations to pay for livestock? YES ( ) NO ( )

Have any judgements for money ever been entered against you which have not been satisfied? YES ( ) NO ( )

**If you have answered YES to any of the above questions you should give details on a separate piece of paper and submit it with your application.**

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Owner, Partner or Responsible Officer

\_\_\_\_\_  
Title (Owner, Partner, President, etc.)

Sworn to and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
Printed Name of Notary Public

\_\_\_\_\_  
Notary Public

My Commission Expires: \_\_\_\_\_

## **NOTICE**

**Applications will not be processed without the \$30.00 permit fee. Check or Money order should be made payable to the Alabama Department of Agriculture and Industries.**

**Surety bond or its equivalent must be submitted with application if the applicant is not bonded with the Packers and Stockyards Administration in the amount of \$ 10,000.00 or more.**