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| DATCPlogo_1in_g | Wisconsin Department of Agriculture, Trade and Consumer Protection*Division of Animal Health*, Phone (608) 590-8519 Fax (608) 224-4871 | PERMIT NUMBER |

INSTRUCTIONS FOR APPROVED IMPORT FEED LOT PERMIT APPLICATION

Legal Name: Enter the name of the business entity. If you are doing business as a sole proprietor or a married couple, enter the name(s) of the individual(s) as the business name. If you have formally formed the business into a partnership, corporation, limited liability company (LLC), limited liability partnership (LLP), trust, cooperative or other legally constituted entity and have registered with the Department of Financial Institutions, if required, enter the complete name of that entity and the business mailing address. General partnerships must submit proof of formation.

DBA, Trade Names, Etc. If you, as an individual or even as a corporation or LLC, sometimes or generally conduct your business under a name which you have not formally constituted as a separate legal entity, then you are considered to be "doing business as," or "using a trade name of." Please enter all such designations that you use for the business which is being licensed, not names you are using for other businesses.

Legal Entity Type: On the application, indicate the entity type and the state in which it was formed. If your legal entity is a general partnership or trust, you must submit proof of its existence. (Call us to learn what proof to submit.) If you are requesting a class A market license for a premise that was not licensed during the preceding year, an inspection of the site will be required before you receive your license. If you are requesting a trucker or dealer license for the first time, we will meet with you to discuss program requirements shortly after you receive your license.

Business Location: We must have the location information for the address at which you transact the business for which we are licensing you. You may list more than one location for conducting business under a dealer or trucker license, such as several markets where you are a dealer or several places where you keep trucks. You may **NOT** list more than one location for conducting business under a market license. Each market location requires a separate application. Be sure to include contact names and phone numbers.

Premises Code: If you keep livestock on your property (even for short periods of time) related to your animal dealer, animal trucker or animal market business, a premises code is required. (ALL markets must have a premises code.) If you currently have a premises code for the same address because of livestock you own that you keep at that address, you may use that premises code. You must renew any premises code applicable to your business location every 3 years. For premises code information, visit the Wisconsin Livestock Identification Consortium (WLIC) website: [http://www.wiid.org](http://www.wiid.org/) or call 888-808-1910.

Fees: $140 annually. There are no late fees for new permits. Late fees will be applied to any renewal application filed after a license has expired.

Total Your Fees. Make check payable to WDATCP.

Authorized Signatures: The application must be signed by an authorized person(s). An authorized person is a sole proprietor (or both spouses if both listed) or a person whose name appears as an officer, partner, trustee, manager or member (if authorized by the entity's incorporation/organization documents or bylaws). Also enter the title of the person who has signed the application, and enter the date signed.

Renewals Only

**Pre-printed Information:** We have pre-printed our database information on your application. Please review the information for accuracy. Mark any changes or corrections on the application. Please complete blank areas.

* If you are CHANGING the Legal Entity Type on this renewal, this may result in a new license number being issued to you. We will verify.
* If you are ONLY CHANGING the Name of the Legal Entity, we will verify that change. A new license/license number may not be required.

MAIL YOUR APPLICATION AND PAYMENT TO:
WDATCP
Division of Animal Health
PO Box Lockbox 93598
Milwaukee WI 53293-0598

If you have any questions, contact the licensing associate at ***(608) 590-8519.***

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| DAH-BADC-014.docx (rev. 01/23) | LICENSE NUMBER |
| DATCPlogo_1in_g | APPROVED IMPORT FEED LOTPERMIT APPLICATIONFor the Period Ending June 30, 2024s. 95.715, Wis. Stats., s. ATCP 10.22(9)(b), Wis. Adm. Code |  |

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| LEGAL NAME       |
| DBA, TRADE NAMES, OTHER NAMES USED TO CARRY OUT THIS BUSINESS (List all)      |
| LEGAL ENTITY TYPE |
| [ ]  Individual[ ]  Married couple |  | [ ]  General partnership | [ ]  Cooperative | [ ]  Corporation | [ ]  LLC | [ ]  Trust |
| [ ]  Other |       | STATE BUSINESS IS FORMED IN |    |
| PRIMARY PHONE (   )     -      | WORK PHONE (   )     -      | MOBILE PHONE (   )     -      | FAX(   )     -      |
| E-MAIL      |
| BUSINESS LOCATION STREET      | CITY      | STATE   | ZIP      |
| FIRE #      | LIVESTOCK PREMISES CODE      | COUNTY      |
| TOWN      | SECTION      |
| MAILING ADDRESS STREET      | CITY      | STATE   | ZIP      |
| CONTACT NAME (if other than applicant)      | CONTACT E-MAIL      |
| CONTACT PRIMARY PHONE (   )     -      | CONTACT WORK PHONE (   )     -      | CONTACT MOBILE PHONE (   )     -      |

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| OFFICERS, PARTNERS, MANAGER/MEMBERS OR TRUSTEES  |
| NAME  | TITLE  | WORK PHONE  | E-MAIL |
|       |       | (   )     -      |       |
|       |       | (   )     -      |       |
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|  | $      | $140  | Import Feed Lot Permit *(nonrefundable)* |
| FEES | $      | $28  | Late Fee (If renewal application is returned after June 30.) |
|  | $      | **Total All Fees**  | Enclose check or money order made payable toWDATCP or Wisconsin Department of Agriculture, Trade and Consumer Protection |

If permit is granted, (I, we) hereby agree

1. To fully comply with the state requirements for this permit (s. ATCP 10.22(9), Wis. Adm. Code).
2. To provide adequate enclosure to prevent commingling of feeder cattle with any other cattle on the premises.
3. To furnish feeding and watering facilities separate from those used for other cattle.
4. To ensure the feed lot is devoid of vegetation.
5. To retain for a period of five years all shipping documents that pertain to animals moving into and out of the feed lot, and records of any animal which died at the feed lot.
6. To remove no animals from the feed lot except in compliance with Wisconsin Statutes and Administrative Code.
7. To ensure that every animal in the feed lot, except a steer or official spayed heifer, has official identification. If (I, we) receive an animal without official identification, (I, we) shall immediately identify the animal with official identification.

I certify that all information on this application and any attached sheets are true, accurate and complete. I certify by my signature that I am familiar with the Wisconsin Administrative Code rules and Wisconsin Statutes applicable to approved import feed lots within Wisconsin.

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| SIGNATURE OF AUTHORIZED PERSON | DATE |
|   |   |
| PRINT NAME OF PERSON SIGNING | PRINT TITLE OF PERSON SIGNING |

If you have any questions, contact the licensing associate at **(608) 590-8519.**

Personal information you provide may be used for purposes other than that for which it was originally collected (s. 15.04(1)(m), Wis. Stats.).

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| This institution is an equal opportunity provider. |