

## APPLICATION FOR FERAL SWINE HANDLING LICENSE

RETURN TO:

OKLAHOMA DEPARTMENT OF AGRICULTURE, FOOD, & FORESTRY  
ANIMAL INDUSTRY DIVISION  
PO BOX 528804  
OKLAHOMA CITY, OKLAHOMA 73152-8804  
405-522-6102

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| <b>FOR OFFICE USE ONLY</b><br>PERMIT NUMBER: _____<br>DATE ISSUED: _____<br>RCPT. #: _____ AMT: _____<br>REV #372 |
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**UNDER THE TERMS OF OAR 35:15-34-13, I AM ENCLOSING PAYMENT BY CASHIERS CHECK, PERSONAL CHECK OR MONEY ORDER FOR A FERAL SWINE FACILITY LICENSE:**

Category I Sporting Facility: Initial (\$225) \_\_\_\_\_ Renewal (\$125) \_\_\_\_\_ Breeding Facility: Initial (\$500) \_\_\_\_\_ Renewal (\$250) \_\_\_\_\_  
Category II Sporting Facility: Initial (\$325) \_\_\_\_\_ Renewal (\$200) \_\_\_\_\_ Buying Station: Initial (\$125) \_\_\_\_\_ Renewal (\$75) \_\_\_\_\_  
Gathering Station: Initial (\$125) \_\_\_\_\_ Renewal (\$75) \_\_\_\_\_

*(Please print)*

NAME: \_\_\_\_\_ HOME PHONE: \_\_\_\_\_

COMPANY NAME: \_\_\_\_\_ CELL PHONE: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_

STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_ COUNTY: \_\_\_\_\_ OK DRIVER LICENSE: \_\_\_\_\_

PHYSICAL ADDRESS: \_\_\_\_\_

IS PROPERTY OWNED \_\_\_\_\_ OR LEASED \_\_\_\_\_ ?

OWNER IF DIFFERENT THAN ABOVE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_

HOME PHONE: \_\_\_\_\_ CELL PHONE: \_\_\_\_\_

GPS COORDINATES: \_\_\_\_\_ PREMISE IDENTIFICATION NUMBER IF APPLICABLE: \_\_\_\_\_

LEGAL DESCRIPTION TO THE NEAREST QUARTER SECTION: \_\_\_\_\_

LIST NUMBER OF ACRES AND DESCRIBE FACILITIES IN DETAIL: \_\_\_\_\_

NAME, ADDRESS, AND PHONE NUMBER WHERE RECORDS KEPT: \_\_\_\_\_

CARCASS DISPOSAL METHODS: \_\_\_\_\_

(continued on other side)

PLEASE ATTACH MAP SHOWING TOPOGRAPHY OF THE AREA WITH A DIAGRAM OF THE FACILITY STRUCTURES, FENCING PLAN, AND PERIMETER CLEARLY MARKED.

**TRANSPORTER'S LICENSE ONLY:** Transporter License: Initial (N/C) \_\_\_\_\_ Renewal (N/C) \_\_\_\_\_

NAME: \_\_\_\_\_ PHONE NUMBER: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

DRIVER'S LICENSE NUMBER: \_\_\_\_\_

AREA SWINE TYPICALLY TRANSPORTED IN: \_\_\_\_\_

DESCRIPTION OF VEHICLES AND TRAILERS USED TO TRANSPORT FERAL SWINE INCLUDING LICENSE TAG NUMBERS: \_\_\_\_\_

LOCATIONS WHERE FERAL SWINE ARE TYPICALLY TRANSPORTED: \_\_\_\_\_

**ALL APPLICANTS:**

HAS THE APPLICANT BEEN CONVICTED OF A FELONY, MISDEMEANOR, ADMINISTRATIVE, OR CIVIL VIOLATION OF ANY NATURAL RESOURCES REQUIREMENTS, INCLUDING BUT NOT LIMITED TO WILDLIFE, FORESTRY, FISHERIES, ENVIRONMENT, OR ANIMAL HEALTH WITHIN THE PAST THREE (3) YEARS IN OKLAHOMA OR ANY OTHER JURISDICTION? YES \_\_\_\_\_ NO \_\_\_\_\_

In operating under this License, I agree to comply with the laws of the State of Oklahoma, and the rules and regulations of the Oklahoma Department of Agriculture, Food and Forestry (ODAFF). I will keep permanent records, which may be disposed of after three (3) years, of all feral swine raised, trapped, caught, purchased, sold, and killed. Such records shall be available for inspection at all reasonable times by an authorized representative of the Oklahoma Department of Agriculture, Food and Forestry. I further understand that according to Title 35, Chapter 15, Subchapter 34 as a Feral Swine licensee under this section, if I keep or maintain on my premises any feral swine, I shall at all times keep feral swine confined to the premises described in this Feral Swine Handling application, and controlled and restrained in such a manner so the life, limb or property of any person lawfully entering the premises shall not be endangered. I also understand that I shall control and restrain feral swine so that there is no direct contact between the public and the swine, and the public shall not be allowed to enter into any enclosures occupied by swine. In addition, I understand that I may not sell any feral swine to any person that does not possess a current Feral Swine License, nor may I transport live feral swine to any facility other than a licensed sporting facility, licensed breeding facility, licensed buying station, licensed gathering station, or approved market or slaughter facility.

I CERTIFY UNDER PENALTY OF LAW THIS DOCUMENT, ALL ATTACHMENTS, AND INFORMATION SUBMITTED ARE TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, ACCURATE, AND COMPLETE. I AM AWARE THERE ARE SIGNIFICANT PENALTIES FOR KNOWINGLY SUBMITTING FALSE, INACCURATE, OR INCOMPLETE INFORMATION, INCLUDING THE POSSIBILITY OF FINES FOR EACH VIOLATION.

SIGNATURE OF APPLICANT: \_\_\_\_\_ DATE: \_\_\_\_\_

Severally sworn to before me this

\_\_\_\_\_ Day of \_\_\_\_\_, 20\_\_\_\_

\_\_\_\_\_