



In accordance with 1937 PA 284, as amended.

Livestock Dealer License Application

License Year Ending: _____ Status: New Renewal No Longer Needed
 If Renewal, License No. of Establishment: _____

Business Information

Business Name: _____
 Business Address: _____
 City: _____ State: _____
 County: _____ Zip: _____
 Business Phone: (____) _____ Business Fax: (____) _____
 Business Email: _____
 Mailing address if different from above: Street or P.O. Box: _____

 City: _____ State: _____ County: _____ Zip: _____

Blank Space
For Official Use Only

Corporate/Owner Information

Ownership Type: Corporation Sole Ownership Partnership L.L.C. Other: Specify _____
 Corporation Name: _____
 Owner/President (CEO) Name: _____
 Street Address of Corporation or Owner: _____
 City: _____ State: _____ County: _____ Zip: _____
 Phone: (____) _____ Fax: (____) _____ Email: _____
 Emergency Contact: (____) _____ Cell Phone: (____) _____

Federal/Tax ID #

License Fees

<input type="checkbox"/> Class I (Livestock Auction) \$400	<input type="checkbox"/> Class III (Horse Auction) \$150
<input type="checkbox"/> Class II (Collection Point/Buying Station) \$250	<input type="checkbox"/> Class IV (Dealer/Broker/Agent) \$50

All four classifications are under AOBJ: 0217

Payment Method: Check/Money Order No. _____ Amount enclosed: _____

Please make check/money order payable to the State of Michigan and submit to the address at the top of the page.

Signature: _____ Date: _____

Please print your name here: _____

Title: _____

Application continues
on the back of this form

