



PUBLIC HEALTH PERMIT/LICENSE - SUPPLEMENTAL APPLICATION

ANIMAL KEEPER
VECTOR MANAGEMENT PROGRAM
 Environmental Health Division
 5050 Commerce Drive, Baldwin Park, CA 91706
www.publichealth.lacounty.gov/eh
 (626) 430-5450



Completed application and supporting documents must be submitted to Vector Management Program located in 5050 Commerce Drive, Baldwin Park, CA 91706. For more information call 626-430-5450.

Date of Application:		Business Name (DBA):	
NUMBER OF ANIMALS	Please check all that apply and provide the number-of animals below:		FEE
	Category I	<input type="checkbox"/> 5-49 horses (including ponies, mules, or donkeys) <input type="checkbox"/> 50-499 rabbits or hares <input type="checkbox"/> 10-49 <u>total</u> horses, ponies, mules, donkeys, cows, sheep, goats, or hogs	\$522
	Category II	<input type="checkbox"/> 50-99 <u>total</u> horses, ponies, mules, donkeys, cows, sheep, goats, or hogs <input type="checkbox"/> 500 or more rabbits or hares <input type="checkbox"/> 500-999 poultry or wild fowl	\$646
	Category III	<input type="checkbox"/> 100 or more total horses/ponies, mules, donkeys, cows, sheep, goats, or hogs <input type="checkbox"/> 1,000 or more poultry or wild fowl	\$708
	Number of Animals	Horses _____ Ponies _____ Mules _____ Donkeys _____ Cows _____ Sheep _____ Goats _____ Hogs _____ Rabbits or Hares _____ Poultry or wild fowl _____	
You may be exempt from paying a <i>license fee</i> if: <ul style="list-style-type: none"> • You own less than 10 horses, mules or donkeys and do not operate a boarding facility or receive income from the use of your animals • You belong to a 4-H club, Future Farmers of America or a similar recognized group which is an organized program to encourage student participation in agricultural activities, and the animals are for that purpose. For more information contact the Vector Management Program at 626-430-5450.			
Signature:		Title:	
Print Name:		Date:	
OFFICE USE ONLY			
The following information was reviewed and verified by: Print Name: _____		SR # _____	Invoice # _____
		Date: _____	
		Old account to be inactivated if applicable: PR: _____	
		FA: _____	