

Florida Department of Agriculture and Consumer Services Division of Animal Industry Bureau of Animal Disease Control

APPLICATION FOR NEW BRAND RECORD

534.021, Florida Statutes

Remit \$10.00 Recording Fee Online at: www.FDACS.gov - or -

Check or Money Order Payable to FDACS and remit to:

FDACS P.O. Box 6710 Tallahassee, FL 32314-6710

Contact: Brands Program 850-410-0900 / Fax 410-0946 Email: <u>BrandsProgram@FDACS.gov</u> www.FDACS.gov/AI

Note: All documents and attachments submitted with this request are subject to public review pursuant to Chapter 119, F.S.

MAKE AN EXACT DRAWING OF DESIRED BRAND IN BLACK INK IN THE SPACE PROVIDED BELOW								
Please make lines a minimum of 1/8 inch thick for	r clarity of brand certificate. Example:							
	Farmania O (1)							
4	Earmarks- Optional							
(7 7	RIGHT LEFT							
	<u> </u>							
	Read Your Ear Marks							
	1							

PLEASE FILL OUT THE INFORMATION REQUESTED IN BLACK PEN Brand to be registered to: (Please print or type Individual or Company name to be on Certificate)									
brand to be registered to. (Flease print or type individual or Company hame to be on Certificate)									
Iron Brand Name: (Name you give your brand EDACS will assign a brandahatical name):									
Iron Brand Name: (Name you give your brand. FDACS will assign a brandabetical name):									
Owner or Contact Name (Printed):									
Address:									
					T	Telephone Number: ()			
Email:					С	Cell Phone: ()			
BRAND POSITIONS				BRAND WILL BE USED ON					
(Check All That Apply)				(Check All That Apply)					
Right		Left		Bovine □		Porcine	Equine		
	Hip			Other (if you selected other, please specify:					
	Rib			BRAND REGISTERED STATEWIDE					
	Shoulder			Statewide					
	Neck			Primary County:					
	Jaw								
I (we) hereby make application to record the brand and earmarks (optional) as shown, in the State of Florida as provided in Section 534.021, Florida Statutes. A Parent or Legal Guardian must sign if the owner is a minor:									
		i, i lorida c	<i>ع</i> اد	atutes. A Farent of Le	yai C	Date:			
Owner Signature: Date: Parent/Legal Guardian signature (if applicable):									
Owner Signature: Date:									
Parent/Legal Guardian signature (if applicable):									
Upon receipt of a completed application and recording fee, the Department will review the application and approve or									
deny the brand/application within 90 days. If recording fee is remitted online, please provide the confirmation number									
below.									
Online Payment Confirmation Number									
If recording fee is remitted online, email this									
completed form to brandsprogram@FDACS.gov									
Or mail to:									

FDACS 407 South Calhoun St., Room 315 Tallahassee, FL 32399-0800

If recording fee is being made by check or money order, mail payment and completed form to the following address:

FDACS PO Box 6710 Tallahassee, FL 32314-6710 Org Code: 42 09 02 01000

OE:A2

Object Code: 001357 Fee: \$10.00