



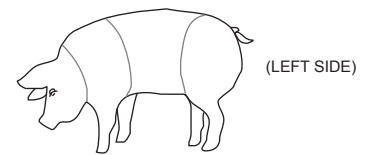
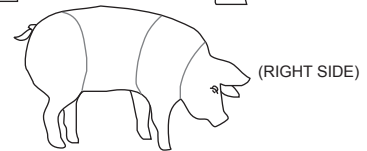
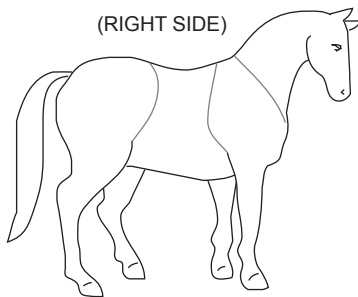
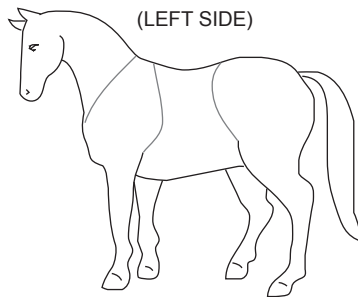
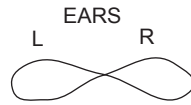
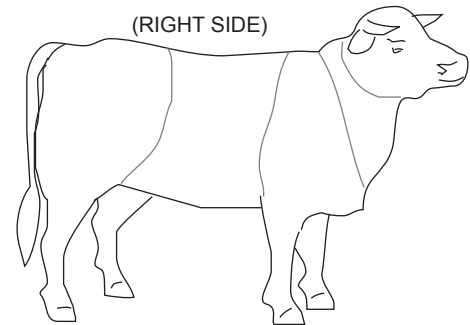
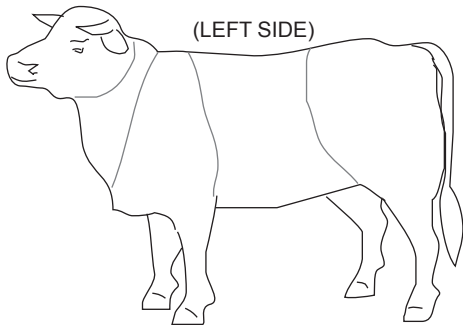
APPLICATION FOR LIVESTOCK BRAND REGISTRATION

State Form 550 (R6 / 1-17)

Return to:
INDIANA STATE BOARD OF ANIMAL HEALTH
 Discovery Hall
 1202 East 38th Street, Suite 100
 Indianapolis, IN 46205-2898
 Telephone number: (317) 544-2400
 Fax number: (317) 974-2011

Name of individual		Name of business / farm (if applicable)	
Name as it should appear on the certificate:			Premises identification number
Address of business / farm (number and street, city, state, and ZIP code)		County	Telephone number ()
Mailing address (if different) (number and street, city, state, and ZIP code)		County	Telephone number ()
E-mail address		Type of application <input type="checkbox"/> New <input type="checkbox"/> Renewal (if a renewal, skip to signature)	
Do you have an electronic file of the brand? <input type="checkbox"/> Yes <input type="checkbox"/> No		If yes, BOAH will contact you for a copy of the electronic file. Accepted formats are Adobe Illustrator and JPEG.	

NOTE: BRANDS ARE NOT RECORDABLE ON THE HEAD OR NECK AREA OF LIVESTOCK OR ON THE RIBS OF HORSES. (See instructions.)



Draw your first choice on livestock above and on the attached sketch form, and write the name of the brand as you read it here:

SECOND CHOICE:

Draw your second choice in the space above and write the name of the brand as you read it here:

NOTARY CERTIFICATE (NOT required for RENEWAL.)

STATE OF _____ }
 COUNTY OF _____ } SS:

The undersigned, being duly sworn upon his oath, states or affirms that he is the applicant (or duly authorized representative of the applicant herein named, to make this affidavit) and that he has read the foregoing statements and that to the best of his knowledge and belief they are true and correct and that he will comply with all laws and regulations of the Board of Animal Health pertaining to his business.

Signature of applicant	Date signed (month, day, year)	Signature of Notary Public
Signature of applicant's representative	Date signed (month, day, year)	Printed or typed name of Notary Public
Date subscribed and sworn to (Notary Public) (month, day, year)		County of residence Date commission expires (month, day, year)

Please draw an exact size facsimile of your proposed brand below. The squares on the sketch form are 1-inch.

Specify livestock to be branded:

Specify livestock to be earmarked: