



# Wyoming Livestock Board

"Safeguarding Wyoming's Livestock Industry Today and for the Future"



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**Dave Freudenthal**  
Governor

**James L. Schwartz, Director - Chief Executive Officer**  
**Walter E. Cook, DVM - State Veterinarian**

**Jim Logan, DVM**  
Assistant State Veterinarian

## Wyoming Livestock Dealer Application

**Livestock Dealer Name:** \_\_\_\_\_

**Livestock Dealer Business Name:** \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Physical Address: \_\_\_\_\_

Town: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Phone: ( ) \_\_\_\_\_

Cell Phone: ( ) \_\_\_\_\_ Email: \_\_\_\_\_ Fax: \_\_\_\_\_

Premise Identification (of place of business; if available): \_\_\_\_\_

### Organization Structure:

LLC \_\_\_ Individual \_\_\_ Corporation \_\_\_ Partnership \_\_\_ Association \_\_\_ Other \_\_\_

### Majority Owner of livestock dealer organization (if not an Individual Organization)

Name: \_\_\_\_\_ Address: \_\_\_\_\_

Town: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Phone: ( ) \_\_\_\_\_

Fax: ( ) \_\_\_\_\_ Email: \_\_\_\_\_

### Operating partners or agents of organization (if applicable) (use separate sheet if needed):

Name: \_\_\_\_\_ Address: \_\_\_\_\_

Town: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Phone: ( ) \_\_\_\_\_

Fax: ( ) \_\_\_\_\_ Email: \_\_\_\_\_ Partner?( ) Agent?( ) [check which applies]

Name: \_\_\_\_\_ Address: \_\_\_\_\_

Town: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Phone: ( ) \_\_\_\_\_

Fax: ( ) \_\_\_\_\_ Email: \_\_\_\_\_ Partner?( ) Agent?( ) [check which applies]

### Board Members

Phil Marton  
Casper  
President

William Taliaferro  
Rock Springs  
Vice President

Donna Wells-Phipps  
Lingle

Rob Orchard  
Ten Sleep

Fred Wilson  
Newcastle

Eric Barlow, DVM  
Gillette

Albert Sommers  
Pinedale

Name: \_\_\_\_\_ Address: \_\_\_\_\_

Town: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Phone: ( ) \_\_\_\_\_

Fax: ( ) \_\_\_\_\_ Email: \_\_\_\_\_ Partner? ( ) Agent? ( ) [check which applies]

Name: \_\_\_\_\_ Address: \_\_\_\_\_

Town: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Phone: ( ) \_\_\_\_\_

Fax: ( ) \_\_\_\_\_ Email: \_\_\_\_\_ Partner? ( ) Agent? ( ) [check which applies]

**Livestock Brand Inspector used most frequently:**

Name: \_\_\_\_\_ Address: \_\_\_\_\_ Town: \_\_\_\_\_

Zip Code: \_\_\_\_\_ Phone: ( ) \_\_\_\_\_

**Compliance with state statute, code of federal regulations and Agency rules:**

Are you familiar with all of the provisions of Title 11, Chapter 22 state statutes dealing with livestock dealers, applicable federal code and applicable rules issued and promulgated by the Wyoming Livestock Board regarding livestock dealers, animal import and brand inspection and do you agree to be bound by the aforementioned? Yes \_\_\_ No \_\_\_ *(please initial your response)*

**Signature of applicant:**

The undersigned hereby declares that the information in this application is true, accurate and correct and it is understood that the information provided is expressly for the purpose of registering as a Wyoming livestock dealer. (All parties with any financial interest in this endeavor must sign this application)

Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

**Office use only:**

Date application received: \_\_\_\_\_ Date Registered: \_\_\_\_\_ By: \_\_\_\_\_

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