

Form 1

MINISTRY OF AGRICULTURE, WATER AND FORESTRY

Animal Health Act, 2011 (Act No. 1 of 2011)

(Section 24(4), Regulation 3(3))

**APPLICATION FOR REGISTRATION OF PLACE
AS REGISTERED ESTABLISHMENT****IMPORTANT NOTES:**

- (a) Please contact the office of the local Veterinary Official for guidance in completing the application form.
- (b) The application should be submitted to the office of the local State Veterinary Official.
- (c) Please complete parts A and B and attach the required supporting documents.
- (d) This application form is not to be used for registration of animals gathering establishment.
- (e) Incomplete application will not be accepted.
- (f) Please use **BLOCK LETTERS**.

A. APPLICANT DETAILS:Owner ☐Representative ☐

1. Name			
2. ID/CC Registration Number			
3. Postal address			
4. Telephone No.	Fax No.	Cell. No.	
5. Email			

B. DETAILS OF PLACE TO BE REGISTERED AS REGISTERED ESTABLISHMENT:

1. Name				
2. Physical address				
3. GPS Coordinates	Latitude		Longitude	
4. Type (may tick more than one)	Resettlement farm	Commercial farm	Communal farm	Other(specify)

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Signature of the applicant.....
Date*For official use***Granted/ Refused (delete what is not applicable)****Reference Number**.....
Name of Veterinary Official.....
Rank.....
Signature.....
Date stamp

NB: If the applications is refused please attach Form 2 indicating reasons why the application is refused