## Make Check Payable to: Department of

## TRANSFER PERMIT APPLICATION

TO: THE DEPARTMENT OF ANIMAL SERVICES

No Refund Allowed
Applications Must Be
Filled Out Completely

Animal Serv	vices	3201 Lacy Street, Los Ange	eles, CA 90031	Filled Out Completely	
Name of Applicant/Authorized Representative (Print Clearly)		Clearly)	Purpose of Transfer F	Permit: Check One:	
			( ) Commercial	() New	
Address of Applicant (HOM	IE)	Phone	( ) Non-Commercia	` '	
City		Zip	Have you ever been convicte	ed of Animal Cruelty?	
City		Σ.ΙΡ	() Yes	( ) No	
Name of Business			Have you received a copy of the Department of Animal Services Permit		
		To.:	Transfer Rules and Regulation	ons?	
Business Address		Phone	() Yes	( ) No	
City		Zip	Have you read and understa Rules & Regulations?		
			() Yes	( ) No	
Type of Business?			Days Open	too	
Business License Number		DAS Permit #	Hours of Business	100	
		BAG I CHIII #	Hours of Business	am / pm to: am / pm	
			Comments:	am / pm	
			Comments.		
Emergency Contact Person		Phone Number:			
Animals are to be housed at: ( ) Home		() Home () Business	( ) Other (please specify	y below #2)	
		NUMBER AND TYPE OF A			
Type (s) of Animals / License number  NUMBER AND ITPE C					
1 )   0   0   7   1   1   1   1	, License Hamber	Joon.	Quantity		
		s/n circle: yes or no			
#2 Name :		Local or cell Phone:	Comments:		
2. Name of Business/Owner:		Phone:	Quantity	Type(s) of Animals	
Address:					
City:		Zip:			
Business License Number:		DAS Permit #	Breeder Permit Number:		
		Llos the Boyeres Side if Add	itional Space is Needer	4	
L hereby agree	on their hehalf to	Use the Reverse Side if Add	•	ons of the Department of Animal Services. I	
certify that all stater	ments made on or i		and complete to the best of my	knowledge and belief, and I understand and	
	-		a regular basis in accordance	with the provisions of sections 53.03, 53.50,	
53.15.2 and 53.65 L	A.M.C. and such c	other sections as may be applicable.			
	Date		Signature of Authorized R	epresentative	
		For Official Use			
			nt () meets () does not meet the requirements set forth in L.A.M.C. 53.15.2 and all able state and federal laws. Therefore the permit shall be: () Granted () Denied		
Total Fees: Permit Fees:		onto apprount state and rederal laws. II	INSPECTION	, crantou ( ) bonicu	
Permit Number:	Permit Issued:	Date: Inspected E	By:	Approved By:	
	i ciliii issueu.				
Expires:		Consert Manager		Data	
	I	General Manager		Date	