



ALABAMA STATE BOARD OF  
VETERINARY MEDICAL EXAMINERS  
8 COMMERCE STREET – SUITE 910  
MONTGOMERY, AL 36130-5330



### PREMISE PERMIT APPLICATION

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

Premise Permit Inspection Fee: \$200.00

New Inspection: \_\_\_\_\_ Reinspection / Change of Ownership: \_\_\_\_\_

Facility Name: \_\_\_\_\_

Facility Address: \_\_\_\_\_

\_\_\_\_\_

Telephone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

#### Veterinarians Responsible for Management of Premise

Name: \_\_\_\_\_ Alabama License Number: \_\_\_\_\_

Name: \_\_\_\_\_ Alabama License Number: \_\_\_\_\_

Name: \_\_\_\_\_ Alabama License Number: \_\_\_\_\_

Name: \_\_\_\_\_ Alabama License Number: \_\_\_\_\_

Name: \_\_\_\_\_ Alabama License Number: \_\_\_\_\_

\_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_