



**ALABAMA STATE BOARD OF  
VETERINARY MEDICAL EXAMINERS**  
8100 SEATON PLACE – SUITE A  
MONTGOMERY, ALABAMA 36130-5330  
334/395-5112  
FAX: 334/395-5117



**PREMISE PERMIT APPLICATION**

<b>Date:</b>	
<b>Premise Permit Inspection Fee:</b> <u>\$200.00</u>	
<b>New Inspection:</b> _____	<b>Reinspection / Change of Ownership:</b> _____
<b>Facility Name:</b>	
<b>Facility Address:</b>	
<b>Telephone Number:</b>	<b>Fax Number:</b>
<b>Email Address:</b>	
<b><u>Veterinarians Responsible for Management of Premise</u></b>	
<b>Name:</b>	<b>License Number:</b>
<b>Name:</b>	<b>License Number:</b>
<b>Name:</b>	<b>License Number:</b>
<b>Name:</b>	<b>License Number:</b>
<b>Name:</b>	<b>License Number:</b>
<b>Signature: _____ Date: _____</b>	