



**OREGON
DEPARTMENT OF
AGRICULTURE**

Animal Health & Identification Programs
(503) 986-4681 (Revised 08/08/2023)

License Number _____

PRINT OR TYPE

License expires at the end of each calendar day

Business Name _____

Telephone No. _____

Licensee Name _____

Fax Number _____

Mailing Address _____

City, State, Zip _____

Temporary One Day Horse Sale

Location of Sale:

Street Address _____

LICENSE FEE: \$25.00

City, State, Zip _____

Day and Hours of Sale _____

Estimated Gross Sales \$ _____

Enter name and address of licensed veterinary inspector

Name: _____

Address: _____

City, State, Zip _____

Enter name and address of licensed weighmaster if scales are used

Name: _____

Address: _____

City, State, Zip _____

Signature _____ Title _____ Date _____

Print name _____

An additional application, license fee and adequate bond are required for each additional day upon which horses are sold.

For Checks or Money Orders, mail to:

Oregon Department of Agriculture
PO Box 4395, Unit 17
Portland OR 97208-4395

For Credit Card Charges, mail or fax to:

Oregon Department of Agriculture
635 Capitol St. N.E.
Salem OR 97301-2532

Secure Fax
(503) 986-4746

Make checks payable to Oregon Department of Agriculture. All dishonored checks or electronic payments will incur a \$25 administrative fee per ORS 30.701.

For Visa or MasterCard Charges Complete the Following Information

Name of Cardholder: _____ Phone: _____

Address of Cardholder: _____ City: _____ Zip: _____

Email or Fax receipt available for credit card payments ONLY. Print Email address or Fax# _____

Signature: _____ Total Charges: \$ _____

Card Number: _____ / _____ / _____ Expiration Date: _____ / _____