



NEBRASKA COMMERCIAL DOG AND CAT
OPERATOR INSPECTION ACT

Date of Pre-inspection:

____/____/____

ANIMAL RESCUE
LICENSE APPLICATION
NEW

1. Your Name:

Business Name of animal rescue seeking licensure:

Nebraska Address: _____

City/state/zip: _____

County: _____

Phone #: _____

Cell #: _____

E-mail: _____

Federal Tax Identification [FTIN] or SS#: _____

2. What is your relationship to the animal rescue organization seeking licensure (check all that applies)?

a. ___ Operator of a rescue not affiliated with a national, regional or state rescue organization

b. ___ Board member of national, regional or state rescue organization

c. ___ Designee of national, regional or state rescue organization

d. ___ Operator of a Nebraska rescue facility affiliated with a national, regional or state rescue organization. (Please supply additional information in question 4.)

Does the national organization have authority to set standards for your rescue facility? Yes No

3. Authorized Contact Person or persons to receive official department or legal notices:

Name: _____

Address: _____

City/state/zip: _____

E-Mail: _____

Federal Tax Identification (FTIN) or SS#: _____

4. If you selected 2(d), please fill in the following:

Name of national, regional or state animal rescue with which you are affiliated: _____

Address: _____

City/state/zip: _____

Phone: _____

5. Do you hold yourself out to be an animal rescue?

Yes No

Do you **accept** or **solicit** for dogs or cats with the intention of finding permanent adoptive homes or providing lifelong care for such dogs or cats? Yes No

Do you use foster homes as the **primary** means of housing dogs or cats? Yes No

6. Type of Entity: Sole Proprietorship Partnership Corporation Non-profit Corporation Other

Facility License Fee:

7. The initial license fee for any person required to be licensed under the act shall be **\$125. This license fee is for the year October 1-September 30.** License fees are due annually. Checks or money orders are preferred. Make checks payable to the **Nebraska Department of Agriculture.**

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NEW

Animal Rescue License Application Addendum
List of Animal Rescue Foster Homes Located in Nebraska

Name of Animal Rescue Applying for License _____
Please list each of the Nebraska foster homes affiliated with the animal rescue.

Beginning on October 1, 2010, if any animal rescue foster home houses **more than twenty dogs or cats** that are six months of age or older in any twelve-month period, or **who participates in the acquisition of dogs or cats**, shall be licensed as an animal rescue. If any foster home utilized by the above animal rescue fits this definition, please check the box beside the name.

<input type="checkbox"/> Name: _____ Address: _____ City/state/zip: _____ Phone: _____ Cell #: _____ Number housed during past 12 months: ___ dogs ___ cats	<input type="checkbox"/> Name: _____ Address: _____ City/state/zip: _____ Phone: _____ Cell #: _____ Number housed during past 12 months: ___ dogs ___ cats
<input type="checkbox"/> Name: _____ Address: _____ City/state/zip: _____ Phone: _____ Cell #: _____ Number housed during past 12 months: ___ dogs ___ cats	<input type="checkbox"/> Name: _____ Address: _____ City/state/zip: _____ Phone: _____ Cell #: _____ Number housed during past 12 months: ___ dogs ___ cats
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