

# Exotic Livestock Facility Permit

Mississippi Board of Animal Health  
PO Box 3889  
Jackson, MS 39207  
601-359-1170 601-359-1177(fax)

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

Permit No. \_\_\_\_\_

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

Address: \_\_\_\_\_ Lat. \_\_\_\_\_ Lon. \_\_\_\_\_

City: \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_

Location of Facility if different from above:

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Size of facility: \_\_\_\_\_

Type of livestock & number of each type:

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Type of fencing:

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\_\_\_\_\_  
Owner/Agent

\_\_\_\_\_  
Inspector

Return to:  
Mississippi Board of Animal Health  
P.O. Box 3889  
Jackson, MS 39207