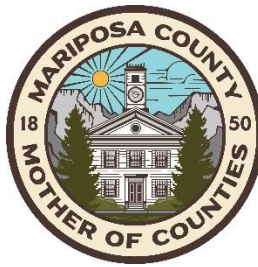


Mariposa County

Department of Agriculture & Weights and Measures

Monica Nielsen
 Agricultural Commissioner & Sealer of Weights and Measures



5009 Fairgrounds Road
 Post Office Box 905
 Mariposa, CA 95338
 (209) 966-2075 Phone
 (209) 966-2056 Fax

agcomm@mariposacounty.org

Application for Mariposa County Commercial Livestock Pass

Business Name: _____

Applicant's Name: _____ **Birthdate** _____
(Must be 18)

Check those that Apply: **Commercial Livestock Owner** **Commercial Livestock Operator** **Managerial Employee**

Contact Number(s): _____ **Cell Phone:** _____

Mailing Address: _____




Email Address: _____

Number of Head: **25-50** **50-100** **100-200** **200+**

FAC 2350(c)(1) Documentation Required (provide and mark 2)

- An operator identification number issued by a county agricultural commissioner.
- An Internal Revenue Service Schedule F (Form 1040) attesting to the applicant's Profit or Loss from Farming.
- Assessor's parcel numbers confirming agricultural zoning for the property or properties upon which access is sought.
- Agricultural land lease documentation.
- Documentation attesting to the applicant's enrollment with a Williamson Act Contract.
- Documentation from the USDA FSA attesting that the applicant is a commercial livestock producer.
- Current registration of a livestock brand with the Bureau of Livestock Identification.

Description of Livestock: _____

Brand	Ear Marks  Right Left	Brand	Ear Marks  Right Left	Brand	Ear Marks  Right Left
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Ear Tag Information _____
Other Information _____
(Beehive Markings, etc.)

Location(s) of Livestock, attach maps for each location listed

Location, Address, or APN	Months of Use <small>(ex. June- Sept)</small>	Number of Livestock Head at Location



Commercial Livestock Operators or Managerial Employee authorized to assist you and what locations.

Business Name	Commercial Livestock Operator/ Managerial Employee	Location, Address, or APN

Commercial Livestock Operators or Managerial Employee you are authorized to assist and what locations. (To be listed on your Commercial Livestock Pass you must be listed on their application)

Business Name	Commercial Livestock Operator/ Managerial Employee	Location, Address, or APN

Additional Identification not listed above

Brand	Ear Marks  Right Left	Brand	Ear Marks  Right Left
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I understand that during times of restricted access caused by a natural disaster, this Commercial Livestock Pass enables the owner, commercial livestock operator, or managerial employee the ability to provide feed, water, medical treatment, and other care to large scale commercial livestock located at the address/location(s) listed above. Care shall only be made during daylight hours due to safety, and all persons must immediately depart the restricted area by the same route as entry. Transportation of animals shall be at the discretion of law enforcement. An escort may be required in any instance. **Access granted under this pass is not guaranteed and will be at the discretion of law enforcement and emergency command.**

Applicant's Signature _____
Date

Mariposa County Department of Agriculture Use Only	
Received By:	Date Received:
Training Date:	Pass #
Required Documents/ Verified (list)	