

FOSTER HOME LICENSE APPLICATION

ILLINOIS DEPARTMENT OF AGRICULTURE
Bureau of Animal Health and Welfare
PO Box 19281
Springfield, IL 62794

BUREAU USE ONLY

Approved by: _____

Date Issued: _____

License No. _____

(Please Print)

1. Name of Licensed Animal Shelter _____

2. Name of Foster Home Applicant _____

Address _____ City _____

Zip Code _____ County _____ Telephone _____

3. Is the above applicant a citizen of the United State of America? Yes No

(If no, state citizenship) _____

4. Previous business connections or experience relating to animal shelters or rescue organizations: _____

5. Has any license of the applicant under this Act or any federal, state county, or local law, ordinance or regulation, relating to dealing in or handling of dogs, cats, birds, fish, reptiles, or other animals customarily obtained as pets in this State, ever been suspended or revoked? Yes No

If yes, please explain: _____

6. Has applicant ever been convicted of a felony? Yes No

ANIMALS IN TRANSIT

7. Method of handling animals in transit in relation to feeding, watering, freedom of movement, type of conveyance, heat and ventilation, disinfecting, and sanitary measures. (Describe in detail) _____

8. Applicant irrevocably consents that actions against him for alleged violations of this Act may be filed in any appropriate court of any county or municipality of Illinois in which the plaintiff resides or in which some part of the transaction occurred out of which the alleged cause of action arose, and that process in any action may be served on the applicant by leaving two copies thereof with the Director of Agriculture of the State of Illinois, who shall forthwith send one copy by registered mail to the applicant at the address shown on this application. Applicant stipulates and agrees that such service of process shall be taken and held to be valid and binding for all purposes relating to such alleged violations.

By virtue of signing this application, the applicant grants permission to authorized employees of the Department of Agriculture to inspect the licensed premises during reasonable business hours or at other times deemed necessary by the Department to enforce the laws of the State of Illinois.

Signature of Animal Shelter Coordinator _____

Signature of Foster Home Applicant _____

PLEASE DO NOT SEND CASH: Application(s) to be accompanied by a fee of \$25 for each foster home license.
Check or money order should be made payable to the Illinois Department of Agriculture.