



MUNICIPAL DISTRICT OF GREENVIEW No. 16

V.S.I. APPLICATION FORM

V.S.I. CARD NUMBER: _____

NAME AND/OR COMPANY NAME: _____

ADDRESS: _____

HOME TELEPHONE #: _____ CELL #: _____

LEGAL LAND DESCRIPTION (RESIDENCE): _____

TYPE OF OPERATION: _____

TYPE OF LIVESTOCK: _____

CURRENT NUMBER OF HEAD (BELOW):

<i>PIGS</i>	<i>GOATS</i>	<i>SHEEP</i>	<i>CATTLE</i>

I, _____, hereby acknowledge that it is my obligation to pay any fees not
Please Print Name

covered by V.S.I.

I also understand that this policy may be changed from time to time as deemed necessary. I declare that I will immediately advise the M.D. of Greenview of any major changes in livestock numbers, type of livestock, livestock locations, or changes to my address, phone number, and contact information.

APPLICANT: _____ DATE: _____

MD REPRESENTATIVE: _____ DATE: _____