



# TEXAS DEPARTMENT OF LICENSING & REGULATION

P.O. Box 12157 • Austin, Texas 78711-2157

[www.tdlr.texas.gov](http://www.tdlr.texas.gov)

## LICENSED BREEDER: NEW LICENSE APPLICATION INSTRUCTIONS

The application must be completed and signed by the applicant. An application is not considered complete and will not be processed until all required items have been submitted.

**DOCUMENTS SUBMITTED WITH YOUR APPLICATION WILL NOT BE RETURNED. KEEP A COPY OF YOUR COMPLETED APPLICATION, ALL ATTACHMENTS, AND YOUR CHECK OR MONEY ORDER.**

1. BREEDER TYPE - Check the appropriate box indicating if you are a dog or cat breeder and provide the current number of intact females at your facility. If a dog and cat breeder, check both boxes and provide the current number of intact females at your facility.
2. BUSINESS NAME - Provide the full name of breeder business.
3. SALES TAX ID NUMBER - Provide the breeder business state sales tax ID number.
4. LIST ALL DBAs FOR THIS BUSINESS - Provide all "Doing Business As" names for this business.
5. TYPE OF OWNERSHIP: Check the box that indicates how this business is organized. You can find a description of the various types of business structures at the [Texas Secretary of State](#).
6. MAILING ADDRESS - Provide the current mailing address for the business. This is the address where we will send you mail. This address can be a post office box. Add the zip plus-4 to help the postal service deliver mail more efficiently and accurately. Always keep your mailing address current with TDLR.
7. PHYSICAL ADDRESS: Provide the physical location for the breeder business. This address cannot be a post office.
8. BUSINESS PHONE - Provide the main business phone number for this business.
9. BUSINESS WEBSITE - Provide the breeder business website address.
10. BUSINESS FAX - Provide the main fax number for this business.
11. CONTACT PERSON - Provide the name of a person we can contact about this breeder business.
12. EMAIL ADDRESS - By providing my email address I authorize TDLR to send licensing communications and required notices to me by electronic mail. I understand that I may revoke this authorization in writing and that I must update my email address or I will not receive these notices. I understand that the email address I have provided in this application will remain confidential except as permitted or required by law.
13. NORMAL BUSINESS HOURS - Provide the normal business days and hours this business will be open.
14. CONTROLLING PERSONS - Provide the name, title (EX: owner, manager, president, partner, secretary, etc.), percentage of ownership, date of birth, gender, mailing address and social security number for all controlling persons of the breeder business.
  - Social security number disclosure is required by Section 231.302(c)(1) of the Texas Family Code in order to obtain a license. Your social security number is subject to disclosure to an agency authorized to assist in the collection of child support payments. For more information regarding child support payments, contact the [Texas Attorney General](#).
  - Indicate if you have ever been convicted of, or placed on deferred adjudication for, any misdemeanor or felony, other than a minor traffic violation. If YES, complete and attach a [Criminal History Questionnaire \(PDF\)](#) for each offense.
  - Indicate if you have ever had an occupational license, certification, or registration suspended, revoked, or denied in any state. If you have, complete and attach a [Disciplinary Action Questionnaire \(PDF\)](#) for each disciplinary action.

15. USDA ANIMAL DEALER LICENSE - Check the appropriate box to indicate if you have a Class A or Class B USDA Animal Dealer License

(a). CLASS A - If you hold a current Class A license, you must submit a copy of your license and sign the Facility Statement of Certification.

(b). CLASS B - If you hold a current Class B license, you must submit a copy of your license, color photos at least 4 x 6 inches of each primary enclosure located on the premises or location for licensure; a statement certifying the number and breed of animals housed in the primary enclosures photographed; and sign the Facility Statement of Certification.

16. STATEMENT OF APPLICANT - Carefully read the statement before you sign, date, and print your name and title on your application.

**SEND YOUR COMPLETED APPLICATION AND REQUIRED DOCUMENTS TO:**

Texas Department of Licensing and Regulation  
P.O. Box 12157  
Austin, TX 78711-2157

Documents submitted with your application will not be returned. Keep a copy of your completed application, all attachments, and your check or money order. Do not send cash.

For additional information and questions, please visit the [TDLR website](#) or reach Customer Service via [TDLR webform](#). The webform will allow you to submit your request for assistance and include attachments needed. Customer Service Representatives are available Monday through Friday (excluding holidays) at (800) 803-9202 (in state only), (512) 463-6599, or Relay Texas-TDD: (800) 735-2989.



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## LICENSED BREEDER: NEW LICENSE APPLICATION

YOU MUST MEET ALL REQUIREMENTS WITHIN 12 MONTHS OF THE FILING DATE, OR THE APPLICATION WILL BE TERMINATED.

### APPLICATION FEE:

#### Tier One:

5 to 10 Intact Females:  
\$150

#### Tier Two:

11 to 25 Intact Females:  
\$300

#### Tier Three:

26 or more Intact Females:  
\$500

(All fees are non-refundable)

### 1. Breeder Type: (check all that apply)

I am a:

☐ Dog Breeder (# of intact females)

☐ Cat Breeder (# of intact females)

### 2. Business Name:

### 3. Sales Tax ID Number:

### 4. List all DBA's for this business: (attach an additional sheet if necessary)

### 5. Type of Ownership:

☐ Sole Proprietorship

☐ Corporation

☐ Limited Partnership

☐ Limited Liability Company

☐ Limited Liability Partnership

☐ General Partnership

### 6. Mailing Address: (USED TO RECEIVE MAIL FROM TDLR) (a PO box is allowed for this address)

Number, Street Name, Suite Number

City

County

State

Zip Code + 4

### 7. Physical Address: (a PO box cannot be used for this address)

Number, Street Name, Suite Number

City

County

State

Zip Code

### 8. Business Phone:

Phone Number

### 9. Business Website:

### 10. Business Fax:

Phone Number

### 11. Contact Person:

Name

### 12. Email Address:

(Ex: johndoe@aol.com) See instruction sheet for disclosure information

**13. Normal Business hours:****Days:****Hours:****14.****CONTROLLING PERSONS**(List ALL) Controlling Persons of this breeder business applying for a license. **(Attach additional pages if necessary)**

A “controlling person” means an individual who:

- (a) is a partner, manager, director, officer, or member of a dog or cat breeder business;
- (b) possesses the authority to set policy or direct management of a dog or cat breeder business; or
- (c) possesses a direct or indirect control of 25 percent or more of a dog or cat breeder business.

TDLR will conduct a criminal background check on each applicant and any controlling person of the application.

**Controlling Person #1****Name:**

Last

First

Middle

**Title:****Percentage of Ownership:**

%

**Gender:** (Check one)**Date of Birth (MM/DD/YYYY)****Male****Female****Social Security Number:** (See instruction sheet for disclosure information)**Mailing Address:**

Number, Street Name, Suite Number

City

County

State

Zip Code + 4

**Have you ever been convicted of, or placed on deferred adjudication for, any misdemeanor or felony, other than a minor traffic violation?** Yes No If YES, attach a [Criminal History Questionnaire \(PDF\)](#) to this application.**Have you ever had an occupational license, certification or registration suspended, revoked, or denied in any state?** (This does not include your driver license.) Yes No If YES, attach a [Disciplinary Action Questionnaire \(PDF\)](#) to this application.**Controlling Person #2****Name:**

Last

First

Middle

**Title:****Percentage of Ownership:**

%

**Gender:** (Check one)**Date of Birth (MM/DD/YYYY)****Male****Female****Social Security Number:** (See instruction sheet for disclosure information)**Mailing Address:**

Number, Street Name, Suite Number

City

County

State

Zip Code + 4

**Have you ever been convicted of, or placed on deferred adjudication for, any misdemeanor or felony, other than a minor traffic violation?** Yes No If YES, attach a [Criminal History Questionnaire \(PDF\)](#) to this application.**Have you ever had an occupational license, certification or registration suspended, revoked, or denied in any state?** (This does not include your driver license.) Yes No If YES, attach a [Disciplinary Action Questionnaire \(PDF\)](#) to this application.

**15.**

**USDA ANIMAL DEALER LICENSE**

**(a) I have a current USDA Class A animal dealer license - USDA Number**

- attach a copy of the USDA license; and
- sign the below Facility Statement of Certification.

**(b) I have a current USDA Class B animal dealer license - USDA Number**

- attach a copy of the USDA license;
- attach a color photo (minimum size: 4 x 6 inches) of each primary enclosure;
- attach a statement certifying the number and breed of animals housed in the primary enclosures; and
- sign the below Facility Statement of Certification.

**FACILITY STATEMENT OF CERTIFICATION**

I certify that my facility meets the standards and qualifications required of a licensed breeder as set forth in the Dog or Cat Breeders Act, Texas Occupations Code, Chapter 802; and the Licensed Dog or Cat Breeder Administrative Rules, 16 Texas Administrative Code, Chapter 91.

Applicant Signature

Date

**16.**

**STATEMENT OF APPLICANT**

By signing and submitting this application, I certify that information contained on this form and any attachments is true and correct. I further certify that I have read and will comply with all applicable provisions of the Dog or Cat Breeders Act, Texas Occupations Code, Chapter 802; and the Licensed Dog or Cat Breeder Administrative Rules, 16 Texas Administrative Code, Chapter 91; I understand that providing false information on this application may result in revocation and/or denial of the license that I am requesting and the imposition of administrative penalties and sanctions.

Authorized Signature

Date Signed

Printed Name

Title