

Kentucky Board of Veterinary Examiners
107 Corporate Drive, Second Floor, Frankfort, Kentucky 40601
(502) 782-0273 ~ Vet@ky.gov ~ kybve.com

APPLICATION FOR REINSTATEMENT FOR ANIMAL CONTROL AGENCIES

Please type or print

Agency Name:	Certification Number:
Address City, State, Zip:	
Agency Work Number:	
Agency Name certificate was issued under:	
Do you have any complaints currently pending against your animal shelter? [] Yes [] No If yes, attach explanation(s).	
Date of expiration of your Kentucky Certificate?	
Attach reinstatement fee of \$75.00 made payable to the Kentucky State Treasurer. <i>(Must be a check or money order)</i>	

Signature of Agency Head or Designee

Date

Print Name and Title of Agency Head or Designee

Do Not Write Below – For Board Use Only

Fee Receipt: Date: _____ Approved: _____ Denied: _____
Amount: \$ _____ Date of Reinstatement: _____