



UTAH DEPARTMENT OF AGRICULTURE AND FOOD

4315 south 2700 west
TSOB South BLDG, Floor 2
Taylorsville, UT. 84129-2128
(801) 982-2240 Information

All Brand Transfers,
will expire on
12/31/2025.

LIVESTOCK BRAND/EARMARK TRANSFER

Brand/Earmark ID Number

Please complete sections 1 and 2

Date

FEES:

Transfer: \$175.00 - each position

BRAND/EARMARK TRANSFER INSTRUCTIONS

- 1. All names currently listed on the brand should be written in section #1. All names listed in #1 must have a notarized signature.
a) If any person or persons are deceased, we need a photocopy of their death certificate and the notarized signature of the administrator of the estate, along with supporting documentation.
b) If a name change occurs due to marriage, a copy of the marriage certificate must be included.
2. In #2 list all names you now want on the brand (with current mailing addresses). Any names that were listed in #1 that you still want on the brand must be listed again in #2.
3. Enclose \$175.00 for each brand position or earmark being transferred.
4. Any questions regarding this transfer form, call (801) 982-2240.

Table with 4 columns: Name, Address, City, State, Zip, Cell Phone, Signature. Row 1 is header, rows 2-7 are empty.

2. APPLICATION:

I (we) hereby make application to record the brand or earmark as shown in #1 above, in the State of Utah as provided in Title 4-24-7 of the UtahCode.

Table with 4 columns: Name, Address, City, State, Zip, Phone, Signature. Rows 1-5 contain numbered entries with 'cell' in the phone column and 'Email:' in the address column.

3. CERTIFICATION: For Office Use Only

This certifies that the brand or earmark previously recorded as shown in #1 is registered to the Applicant(s) shown in #2.

Date Recorder Fee

STATE OF UTAH

COUNTY OF _____

ON THE _____ DAY OF _____ YEAR _____

PERSONALLY APPEARED BEFORE ME

SIGNER(S) OF LIVESTOCK BRAND/EARMARK TRANSFER FORM, WHO DULY ACKNOWLEDGED TO ME THAT HE/SHE/THEY EXECUTED THE SAME.

FORM OF IDENTIFICATION? _____

DID YOU WITNESS THEM SIGNING THE BRAND/EARMARK TRANSFER FORM? _____

PERSON ABOVE SIGNATURE: _____

NOTARY PUBLIC SIGNATURE: _____

STAMP:

DATE: _____