



**Wisconsin Department of Agriculture, Trade and Consumer Protection**  
 Division of Animal Health  
 PO Box 8911, Madison, WI 53708-8911  
 Phone: 608-224-4872 Fax: 608-224-4871

**TEMPORARY DOG MARKET NOTIFICATION**  
 s. ATCP 16.04, Wis. Admin. Code, chs. 93 and 173, Wis. Stats.

<b>NOTIFICATION INFORMATION</b>			
Legal Name of Market Operator			
Market Name (if applicable or different from above)			
Primary #: ( ) - <input type="checkbox"/> Cell <input type="checkbox"/> Home <input type="checkbox"/> Work	Secondary #: ( ) - <input type="checkbox"/> Cell <input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> Fax	Email:	
Primary Contact			
<b>Mailing Address of Market Operation</b>			
Principle Business Address			
City	State	Zip Code	County
<b>Information Regarding Temporary Dog Market:</b>			
Address of Market			
City	State	Zip Code	County
Town	Township	Range	Section
Starting Date of Market		Ending Date of Market	
Days and Hours of Market Operation		Approximate Number of Dog Sellers	
<b>SIGNATURE:</b>			
I certify that all information on this notification form and any attached sheets is true, accurate and complete. I certify by my signature that I am familiar with Wisconsin Administrative Codes and Wisconsin Statutes applicable to dog sellers in Wisconsin.			
Signature: _____			
Printed Name: _____			
Date: _____			
<i>The Department of Agriculture, Trade and Consumer Protection is not responsible for lost, stolen, misdirected, illegible, incomplete, not-received or late notification requests.</i>			
<i>Personal information you provide may be used for purposes other than that for which it was originally collected – sec.15.04(1)(m), Wis. Stats.</i>			