



# ARKANSAS DEPARTMENT OF AGRICULTURE

Permit Number: \_\_\_\_\_

## LIQUID ANIMAL WASTE MANAGEMENT SYSTEM PERMIT TRANSFER FORM

Select all that apply:

- |  |   |
|--|---|
| <input type="checkbox"/> Permittee (legal name) change (change of ownership) | <input type="checkbox"/> Facility name change             |
| <input type="checkbox"/> Permittee (legal name) change (name change only)    | <input type="checkbox"/> Responsible official name change |

### 1. Current Permittee Information

Permittee (legal name): \_\_\_\_\_

Facility Name: \_\_\_\_\_

Responsible Official Name: \_\_\_\_\_

Is the permittee identified above, the owner of the facility? ☐ Yes ☐ No

If No, name of owner: \_\_\_\_\_

### 2. New Permittee Information

Permittee (legal name): \_\_\_\_\_

Facility Name: \_\_\_\_\_

Responsible Official Name: \_\_\_\_\_

Is the permittee identified above, the owner of the facility? ☐ Yes ☐ No

If No, name of owner: \_\_\_\_\_

Responsible Official Name: \_\_\_\_\_

Responsible Official Title: \_\_\_\_\_

Responsible Official Email: \_\_\_\_\_

Permittee Mailing Address: \_\_\_\_\_

Permittee City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Permittee Phone: \_\_\_\_\_ State of Incorporation: \_\_\_\_\_

**Permittee Type:**

☐ State      ☐ Partnership      ☐ Federal      ☐ Public      ☐ Corporation/LLC  
☐ Sole proprietorship      ☐ Other \_\_\_\_\_

Is the new permittee registered with the Arkansas Secretary of State?      ☐ Yes      ☐ No

**If yes, the Permittee (legal name) must exactly match the name registered with the Secretary of State.**

**A current Certificate of Good Standing from the State of Incorporation must be submitted with this form.**

Facility Mailing Address: \_\_\_\_\_

Facility City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Facility Contact Person Name: \_\_\_\_\_

Facility Contact Person Title: \_\_\_\_\_

Facility Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Facility Email: \_\_\_\_\_

Invoice Contact Person Name: \_\_\_\_\_

Invoice Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Invoice Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

### 3. Ownership Change Agreement

Please note you must complete Section III only if this permit transfer is for a change of ownership.

Please specify the closing date for this transaction: \_\_\_\_\_

**Current Permittee (Seller):** \_\_\_\_\_

Signature of Responsible Corporate Officer: \_\_\_\_\_

Title of Responsible Corporate Officer: \_\_\_\_\_

Printed Name of Responsible Corporate Officer: \_\_\_\_\_

Date: \_\_\_\_\_

**New Permittee (Buyer):** \_\_\_\_\_

Signature of Responsible Corporate Officer: \_\_\_\_\_

Title of Responsible Corporate Officer: \_\_\_\_\_

Printed Name of Responsible Corporate Officer: \_\_\_\_\_

Date: \_\_\_\_\_

#### Disclosure Statement:

Disclosure Statement must be submitted for new permittee. Disclosure Statement is not required for Stormwater Permits.

Is Disclosure Statement enclosed: ☐ Yes ☐ No

#### Land Use Contract:

For land application permits you must submit a new land use contracts for all the sites permitted under the current permit for land application. The new land use contract must be signed by the new permittee and land owner.