



# ARIZONA DEPARTMENT OF AGRICULTURE

## CENTRAL LICENSING

Physical Location: 1010 W Washington St., Phoenix, AZ 85007

Mailing Address: 1802 W Jackson St., #78 Phoenix, AZ 85007

Phone: (602) 542-3578 Fax: (602)542-0466

### Instrument of Distribution

If the current named owner of a brand is deceased, the personal representative of the decedent may submit an Instrument of Distribution to change the ownership of the brand. Before any changes can be made, the brand must be current (i.e. not in expired status). To complete this application, please read and follow the instructions below.

Complete Application: Includes the following:

- Name of *current owner(s)* as it appears on the brand;
- The names of all new applicants specified by “OR” or “AND”;
- DBA or name under which livestock will be shipped or sold ***only if different from applicants;***
- If any of the owners, including the personal representative, are retaining partial interest in the brand, they must sign as both Seller and the Buyer and be listed as an applicant.***
- Mailing address;
- Phone Number;
- Email address (if applicable)
- Brand Number;
- Range Location and County;
- Acknowledged Signatures of all specified parties** witnessed by either a Notary Public, Justice of the Peace, a Judge of a court of record, a Clerk or deputy Clerk of a Court having a seal, a Recorder of Deeds, a County Recorder, or Livestock Officer. If all parties involved in the application are unable to appear for acknowledgement at the same time, a separate acknowledgement may be attached for additional signatures.
- A copy of the death certificate for the decedent.
- Documentation** (i.e. Last Will and Testament, Trust Declaration, etc.) **affirming the Personal Representative has the authority** to act on behalf of the deceased brand owner.
- If ownership is being distributed to a business entity, you must provide a copy of the business organizational papers (i.e. Articles of Incorporation or Articles of Organization).
- If ownership is being distributed to a Trust, you must provide a copy of the Trust Declaration which details who has authority to sign for the Trust.

Application Fee: The Fee for an Instrument of Distribution is \$25.00

**Please Note: An Instrument of Distribution does not change the expiration date of the brand.**



**Arizona Department of Agriculture (AZDA)**

Central Licensing  
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Phone: (602) 542-3578 Fax: (602)542-0466  
Website: <https://agriculture.az.gov> Email: [licensing@azda.gov](mailto:licensing@azda.gov)

**For AZDA Use Only**

Brand #: \_\_\_\_\_  
Check #: \_\_\_\_\_  
Check Amount: \_\_\_\_\_  
Line Number: \_\_\_\_\_

**Instrument of Distribution – In the matter of the estate of deceased**

**(ARS 3-1266) Fee \$25**

Name(s) on brand certificate (current owner(s)) \_\_\_\_\_

The undersigned personal representative, in order to make distribution of the property of this estate in compliance with Title 14 Arizona Revised Statutes, relating to the estate of the decedent, hereby assigns, transfers and releases to:

Name of Applicant(s):

\_\_\_\_\_  
And  Or  (Select Only One)

\_\_\_\_\_  
And  Or  (Select Only One)

\_\_\_\_\_  
And  Or  (Select Only One)

\_\_\_\_\_  
And  Or  (Select Only One)

DBA or Name under which livestock will be transported or sold: \_\_\_\_\_  
(Only if different from name(s) listed above)

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email Address: \_\_\_\_\_

a distributee(s) of said estate, all right, title and interest of the decedent in and to the following described property:

Brand #: \_\_\_\_\_

Range: \_\_\_\_\_ County: \_\_\_\_\_  
(City or town where livestock will be located)

**By signing this document, I/we affirm that all information provided herein is true and correct.**

Personal Representative(s), Lawyer, Heir, Etc. **Signatures**

X \_\_\_\_\_

X \_\_\_\_\_

X \_\_\_\_\_

X \_\_\_\_\_

New Owner **Signatures**

X \_\_\_\_\_

X \_\_\_\_\_

X \_\_\_\_\_

X \_\_\_\_\_

Personal Representative(s), Lawyer, Heir, Etc. **Printed Name**

X \_\_\_\_\_

X \_\_\_\_\_

X \_\_\_\_\_

X \_\_\_\_\_

New Owner **Printed Name**

X \_\_\_\_\_

X \_\_\_\_\_

X \_\_\_\_\_

X \_\_\_\_\_

STATE OF \_\_\_\_\_ )  
 ) ss.

County of \_\_\_\_\_ )

On this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, before me personally appeared \_\_\_\_\_  
(Name(s) of ALL Signer(s))

Whose identity was proven to me on the basis of satisfactory evidence to be the person who s/he claims to be and acknowledged that s/he signed the above/attached document.

\_\_\_\_\_  
Signature of Acknowledging Official