Arizona Department of Agriculture (ADA)
Licensing and Registration Section
1688 West Adams, Phoenix, AZ 85007
Phone: (602) 542-0347
Fax: (602) 542-0466

For ADA/ESD Use Only

Brand #:_____

Date Received: _____

Date Recorded: _____

Brand Lease

This is to certify that _____ is the
(Current brand owners as they appear on existing recorded certificate)

registered owner of Brand No._____and has given the right to use said brand on livestock beginning

_____ and ending _____
(Month, Day, Year) (Month, Day, Year)

to the applicants outlined below.

Name of Applicant(s):

_____ _____

And☐ Or ☐(Select Only One) And☐ Or ☐ (Select Only One)

_____ _____

And☐ Or ☐(Select Only One) And☐ Or ☐(Select Only One)

Mailing Address:_____ City:_____ State: _____ Zip:_____

Phone:_____ Email:_____

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.

Lessee(s) **Signature**/Title	Lessee(s) **Printed** Name
X_____	X_____
X_____	X_____
X_____	X_____
X_____	X_____

Owner(s) **{ignature**/Title	Owner(s) **Printed** Name
X_____	X_____
X_____	X_____
X_____	X_____
X_____	X_____

STATE OF_____)
) ss.
County of _____)

On this _____day of _____, 20_____, before me personally appeared_____
(Name of Signer)

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