FORM 32

APPLICATION FOR APPROVAL FOR NON GOVERNMENTAL PROVIDERS OF ANIMAL HEALTH SERVICES

The Chief Executive Officer,

Kenya Veterinary Board,

P. O. Box 513 - 00605,

Nairobi.

I/we. .....

.....

wishing to offer animal health services do hereby apply for approval of our organization known as

…….…… situated in the town of

.....

Our organization desires to offer animal health services in the following region of Kenya.

.....

The animal health operation of our organization will be under the responsibility of ……..……., a registered veterinary surgeon.

I hereby provide copies of registration documents of the organization and the veterinary surgeon.

Date. ....

Signature of applicant (in-charge of the organization)

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