West Virginia Board of Veterinary Medicine

Veterinary Facility Annual Registration

Fiscal Year 2013  (July 1, 2012 - June 30, 2013)

All veterinary facilities in West Virginia must be registered with the West Virginia Board of Veterinary Medicine, and must submit annual registration and dues for such premises. Payment is payable to the West Virginia Board of Veterinary Medicine.

(Please check the payment being submitted)

Facility Registration Renewal  ☐ $100.00 Rec’d by 6/30/12  ☐ $125.00 Rec’d after 6/30/12

NEW FACILITIES
☐ $100.00 New Facility (If registered prior to opening)
☐ $125.00 New Facility (Registered after opening)

*New facilities pay current amount unless filing after opening date of the facility.

If the facility is not in compliance with the requirement that the facility be registered, veterinary license renewal will be denied to veterinarian(s) in charge.

Type or print legibly. All questions on pages 1 and 2 must be answered or registration will not be processed.

1. Facility Name: ____________________________________________

2. If facility is closed, date of closure: __________________________

3. West Virginia county in which this veterinary facility is located: ____________________

4. Type of veterinary facility (check only one):
☐ Veterinary Care Facility  ☐ Mobile Facility  ☐ Emergency Facility  ☐ Secondary Outpatient Facility

5. Physical address of veterinary facility: __________________________

6. Mailing address of veterinary facility: __________________________

7. Owner(s) or operator(s) of this veterinary facility: __________________________

8. Phone number of this veterinary facility (including area code): ______________________

9. Facility fax number (including area code): __________________________

10. Facility email address: _________________________________________

11. Hours of operation of this veterinary facility: ______________________

12. Approximate date of establishment of this veterinary facility: ________________

13. Is the veterinarian operating this facility the facility owner? ______________________

(complete on reverse side)
14. Primary operation of this facility
☐ Small animal
☐ Large animal (Specialty species, if applicable, e.g., equine, bovine) _______________________
☐ Mixed
☐ Other If other, specify research, teaching institution, gov’t, etc. _______________________

15. Number of veterinarians at this veterinary facility, either full or part time. _______________________

16. Name(s) of veterinarians employed at this facility: (use separate page, if necessary)
_________________________________________________________________________________
____________________________________
_____________________________________________

17. Does facility employ any Registered Veterinary Technicians, either full or part time? _________

18. Name(s) of RVT’s employed at this facility: _______________________

19. Enclose a check or money order payable to the West Virginia Board of Veterinary Medicine, in the amount of $100.00, if received by the Board no later than June 30, 2012. If received by the Board after June 30, 2012, amount due is $125.00 (unless this is a new facility establishing after June 30, 2012 and registration is filed in the Board office prior to its beginning operation).

20. Are there other veterinary facilities in WV under the same ownership?  
☐ YES  ☐ NO

21. If YES to 20, specify other facilities name(s) and address(es). _______________________

Be sure all questions are completed properly to avoid rejection of processing and possible assessment of delinquency fees

22. I swear by my signature below that all questions on this Veterinary Facility Annual Registration form have been answered completely and honestly.

23. Signature of veterinarian in charge. _______________________
Date: ______________

24. Print name of signature listed on line 23. _______________________

(Do not write below this line)

Return Completed Form with Appropriate Payment To:

WV Board of Veterinary Medicine
5509 Big Tyler Road, Suite #3, Cross Lanes, WV 25313

Posted by Board _________