



VETERINARY PREMISES PERMIT CANCELLATION FORM

1. FACILITY INFORMATION

BUSINESS NAME		PREMISES NUMBER	
TELEPHONE NUMBER		FAX NUMBER	
LOCATION/PHYSICAL ADDRESS			
CITY		STATE	ZIP
MAILING ADDRESS* (ADDRESS OF RECORD)			
CITY		STATE	ZIP

2. CANCELLATION STATEMENT

As of _____, Veterinary Premises Permit # _____ (is/ will be) no longer operational.
DATE HSP

I certify there is **no** veterinary medicine, veterinary dentistry, veterinary surgery, or any various branches thereof practiced under the business _____.
BUSINESS NAME

3. CLIENT RECORDS DISCLOSURE

All client records will be:
(Select one)

Maintained by existing record holder, at: Transferred to:

BUSINESS NAME TELEPHONE NUMBER

LOCATION/PHYSICAL ADDRESS CITY/STATE/ZIP CODE

EMAIL ADDRESS

4. CANCELLATION SIGNATURE – Must be signed by owner of Veterinary Premises Permit.

Name _____ Signature _____

INFORMATION COLLECTION, ACCESS AND DISCLOSURE

The information you provide on this application is maintained by the Executive Officer of the Veterinary Medical Board, Department of Consumer Affairs, 1747 N. Market Blvd., Suite 230, Sacramento, CA 95834, (916) 515-5220. The information is requested pursuant to Business and Professions Code sections 4853 and 4853.1 and California Code of Regulations, Title 16, Sections 2030, 2030.1, and 2030.2.

It is mandatory that you provide all information requested. Omission of any item of required information will result in the application being rejected as incomplete.

You have the right to review the records maintained on you by the Board or department unless the records are exempt by section 1798.40 of the Civil Code. You may gain access to the information by contacting the Veterinary Medical Board at the above address.

The name and address you have included on this application is subject to public disclosure and may be disclosed upon request, however if the residential address is different than the practice address, that address may remain confidential. Please visit the Board's website at www.vmb.ca.gov for further information on the Board.