FORM 4710-24 (March 2018)

OMB NO. 1004.0042 Expires: February 29, 2020

## UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

## MHF & BLM FACILITY REQUIREMENT FORM

Trainer Name:	Phone:	:			
Adopter Name (If trainer is a youth):					
Address/P.O. Box:	City:		State:	Zip:	
Email Address:	D	Date of Birth:			
Are you interested in training horses or burros? Yes No How many untitled animals are at the facility location:			Horses ntitled):		EMM:
Describe your facility: (Facility refers to an enclosed area such as	a corral, bar	m, stall, etc. Material	s used may include: p	pipe panels, wood pos	t, planks, horse fence, etc.)
a) Corral: Length: Width:		_ Height of Corral	:		
Gate Height:Gate Width:					
Materials used in Corral		Material	s used in Gate		
b) Shelter: Type of Shelter:	N	laterials used in Sh	elter (If Applicable	<i>:):</i>	
Length: Width:	Width: Included within corral sq. footage? U Yes U No				
Attached to Corral? 🔤 Yes 🔲 No If not attache	d, how is it a	accessible?			
c) Feed: Type of Hay or Pasture:	Supplemental Feed:			Amount pe	er day:
d) Water: Is there access to a water source. No					
If yes, select your water source: 🛛 Well 🔹 City 🗖 Automatic Water 💁 her:					
e) Trailer: Type of trailer Stock Horse Horse Capacity (No. of animals):					
Dividers* 🔄 es 🐱 If yes, can they be tied or fo	olded back?	Yes No Nur	ber of rear doors:	1 2 Rear Door:	Eull Heght
Half Height 🖙 amp* Yes 🗣 Is trailer covered?	Ves No	]		]	
Solid top? 🛛 Yes 🗔 No 🛛 If not, describe the type of co	over?	*Add	litional restrictions	apply, please conta	act an authorized officer.
Draw a map to the facility (from the nearest major highway) & productions to your location using the lines below.		Draw a layout of th the lines below.	ne corral(s) and she	lter(s) & provide a	brief description using

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*Address of facility if different:					
Directions to facility:					
Signature:	Date:				

## BURDEN HOURS STATEMENT

Public reporting burden for this form is estimated to average 30 minutes per response, including the time for reviewing instructions, gathering and maintaining data, and completing and reviewing the form. Direct comments regarding the burden estimate or any other aspect of this form to U.S. Department of the Interior, Bureau of Land Management (1004-0042), Bureau Information Collection Clearance Officer, (WO-630), 1849 C Street, N.W., Washington, D.C. 20240.