

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT  
**FACILITY CERTIFICATION FORM**

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ MI: \_\_\_\_\_ DOB: \_\_\_\_\_ (MM/DD/YYYY)

SSN/Tax ID #: \_\_\_\_\_ Phone (1): \_\_\_\_\_ Phone (2): \_\_\_\_\_ Email Address: \_\_\_\_\_

Mailing Address/P.O. Box: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

1. How many untitled wild horses or burros are at your facility? Adopted (Untitled) \_\_\_\_\_ Foster \_\_\_\_\_ Other (BLM approved programs) \_\_\_\_\_

2. Additional request to adopt more than four untitled animals\*: # of additional animals requested to adopt \_\_\_\_\_ (continue to #4)

3. Caring for animals outside of BLM Corrals (For fostering, volunteering or partnership programs ONLY):

a) Are you interested in training horses or burros (if applicable)?  Yes  No

b) If yes, how many? Horses \_\_\_\_\_ Burros \_\_\_\_\_

4. Physical Address of your facility (if different than mailing address above): \_\_\_\_\_

Describe your facility: (Facility refers to an enclosed area such as a corral, barn, stall, etc. Materials used may include pipe panels, wood post, planks, horse fence, etc.)

a) Corral: Length \_\_\_\_\_ Width \_\_\_\_\_ Height of Corral \_\_\_\_\_ Gate Height \_\_\_\_\_ Gate Width \_\_\_\_\_  
Materials used in Corral \_\_\_\_\_ Materials used in Gate \_\_\_\_\_

b) Shelter: Type of Shelter \_\_\_\_\_ Materials used in Shelter (if applicable) \_\_\_\_\_  
Length \_\_\_\_\_ Width \_\_\_\_\_ Included within corral square footage?  Yes  No  
Attached to Corral?  Yes  No If not, how is it accessible? \_\_\_\_\_

c) Feed: Type of hay or pasture: \_\_\_\_\_ Supplemental Feed: \_\_\_\_\_ Amount per day: \_\_\_\_\_

d) Water: Is there access to a water source?  Yes  No Water source:  Well  City  Automatic  Other \_\_\_\_\_

e) Trailer: Type of trailer –  Stock  Horse  Homemade Capacity (No. of animals): \_\_\_\_\_ Dividers?  Yes  No  
If yes, can they be secured back?  Yes  No (Additional restrictions apply, please contact BLM)  
Is trailer covered?  Yes  No If not, describe the type? \_\_\_\_\_

<p>Draw a map to the facility (from the nearest major highway) &amp; provide directions to your location using the space below.</p> <p style="text-align: center;">N</p>	<p>Draw a layout of the corral(s) and shelter(s) &amp; provide a brief description using the space below.</p> <p style="text-align: center;">N</p>
<p>Directions to the facility:</p>	<p>Provide a description of the facility layout:</p>

*\*This form is required in addition to the application for private maintenance for the certification of caring for more than four wild horses and burros. An individual or group of individuals can request to adopt more than four wild horses or burros in a 12-month period. This request is initiated by completing this form stating their ability to humanely care for the animals and includes a description of the facilities, including corral and shelter sizes, feed, water and trailer information. The form should be certified by a local humane official, veterinarian, cooperative extension agent, or a similarly qualified person. Once the form is completed, the authorized officer will review, follow-up as needed, conduct an inspection to verify that the applicant's facilities are adequate to care for the number of animals requested and provide a decision.*

\_\_\_\_\_  
(Applicant Signature)

\_\_\_\_\_  
(Date)

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### CERTIFICATION

I, \_\_\_\_\_, am qualified by education, training and/or experience to assess the adequacy of the facility for  
*(Certifying Individual – Print Name)*  
maintaining adopted wild horses or burros.

\_\_\_\_\_  
(Certifying Signature)

\_\_\_\_\_  
(Date)

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### *BLM Official Use Only*

The facility described based on BLM requirements is:  adequate  inadequate to care for the number of animals requested.

\_\_\_\_\_  
(BLM Authorized Officer Signature)

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
# Facility Approved (total # of Animals)

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### NOTICES

The Privacy Act requires that you be furnished the following information in connection with information required by this application.

AUTHORITY: 16 U.S.C. 1333 and 31 U.S.C. 7701.

EFFECT OF NOT PROVIDING INFORMATION: Submission of the requested information is necessary to obtain or retain a benefit. Failure to submit all of the requested information or to complete this form may result in the rejection and/or denial of your facility certification request.

PRINCIPAL PURPOSE: The BLM will use this information when certifying your facility for the care of wild horses or burros. BLM will use your driver's license and social security numbers as necessary for communication purposes.

ROUTINE USES: The primary uses of the information are to:

- 1) Identify adopters who are requesting to care for more than four wild horses or burros;
- 2) Document the certification or rejection of the request to care for wild horses or burros;
- 3) Monitor compliance with laws/regulations concerning maintenance of wild horses or burros outside of BLM care;
- 4) Identify contractors/employees/volunteers/service providers/adopters required to perform program functions i.e., veterinarians, farriers, the U.S. Forest Service (USFS) and the Animal and Plant Health Inspection Service (APHIS);
- 5) Provide necessary program management information to other agencies involved in management of wild horses and burros;
- 6) Identify and assign level of system access required by BLM, USFS and APHIS wild horse and burros program personnel; and
- 7) Authorize the disclosure of records to individuals involved in responding to a breach of Federal data.

**PAPERWORK REDUCTION ACT NOTICE**

The Paperwork Reduction Act of 1995 (44 U.S.C. 3501 et seq.) requires us to inform you that:

The BLM collects this information in accordance with the statutes and regulations listed above, and for the purposes listed above.

Submission of the requested information is necessary to obtain or retain a benefit. You do not have to respond to this, or any other Federal agency sponsored information collection unless it displays a currently valid OMB control number.

**List of Minimum Shelter Requirements by State:**

<b>STATE</b>	<b>MINIMUM REQUIREMENT*</b>	<b>EXAMPLE</b>
Colorado, Idaho, Kansas, Nevada, New Mexico, Oklahoma, Oregon/Washington (east of the Cascade Mountains), Texas, Utah	Shelter shall be available to mitigate the effects of inclement weather and temperature extremes. The requirement is at the discretion of the authorized officer and will vary dependent on the severity of weather in the region.	Natural cover (tree, etc.) or man-made structure (plywood or other material on side of corral, stall, etc.)
Nebraska, Wyoming	Natural cover or man-made structure that provides a wind break.	Tree (etc.) or structure with a side (plywood on side of corral, stall, etc.)
Alabama, Arizona, Arkansas, Florida, Georgia, Kentucky, Louisiana, Mississippi, North Carolina, South Carolina, Tennessee, Virginia	Natural cover or man-made structure that provides shade.	Tree (etc.) or structure with a roof (wood, metal, etc.)
California, Oregon/Washington (west of the Cascade Mountains)	A two (2)-sided shelter with a roof.	Structure with sides and a roof (wood, metal, etc.)
Alaska, Connecticut, Delaware, Illinois, Indiana, Iowa, Maine, Maryland, Massachusetts, Michigan, Minnesota, Missouri, Montana, New Hampshire, New Jersey, New York, North Dakota, Ohio, Pennsylvania, Rhode Island, South Dakota, Vermont, West Virginia, and Wisconsin	A three (3)-sided shelter with a roof. Heated water source (Alaska only).	Structure with sides, a back, and a roof (wood, metal, etc.)

\* These requirements are in addition to state, county, and local animal health and welfare laws and regulations for the area the animal resides.

**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.