

**CITY OF HELEN**  
**HORSE-DRAWN CARRIAGE DRAFT ANIMAL PERMIT**  
**APPLICATION**

NON-REFUNDABLE APPLICATION FEE  
ALL INFORMATION MUST BE FILLED IN COMPLETELY  
OMMISSIONS OR INCORRECT INFORMATION SHALL BE GROUNDS FOR DENIAL OF APPLICATION

Legal Name of Applicant: \_\_\_\_\_

Applicants Address: \_\_\_\_\_

Legal Name and Address of Draft Animal Owner if different from Applicant: \_\_\_\_\_

Company Name: \_\_\_\_\_

Carriage number Draft Animal permitted to: \_\_\_\_\_

Company Street Address: \_\_\_\_\_

\_\_\_\_\_

Mailing Address (if different from street address) \_\_\_\_\_

\_\_\_\_\_

Name of Draft Animal: \_\_\_\_\_

Date of Birth of Draft Animal: NOTE: \_\_\_\_\_

- (1) A sixty five dollar (\$65.00) Non-Refundable Draft Animal Permit fee must be paid by the applicant
- (2) A picture of the draft animal from the front, side, and back must be attached to this application.
- (3) A copy of the last Equine Infectious Anemia Certification (Coggins) must be attached to this application.

**HORSE-DRAWN CARRIAGE DRAFT ANIMAL PERMIT**  
**PAGE 2**

I HEREBY CERTIFY, SWEAR OR AFFIRM, UNDER PENALTY OF LAW. (GA. O.C.G.A. 16-10-71) FALSE SWEARING, THAT THERE ARE NO MISREPRESENTATIONS, OMISSIONS OR FALSIFICATIONS OF THE ABOVE STATEMENTS AND/OR ANSWERS TO THE QUESTIONS. I AM AWARE THAT SHOULD INVESTIGATION DISCLOSE SAME. MY APPLICATION MAY BE REJECTED AND I WILL BE DISQUALIFIED FROM HOLDING A PERMIT TO OPERATE A HORSE-DRAWN CARRIAGE. PER CHAPTER SIXTY SEVEN (67) OF THE HELEN CITY CODE. IF THERE ARE ANY CHANGES OF INFORMATION REQUESTED HEREIN A NEW APPLICATION SHALL BE REQUIRED.

\_\_\_\_\_ Date  
Owner / Applicant Signature

Sworn before me this \_\_\_\_\_ day  
of \_\_\_\_\_, 20 \_\_\_\_\_.

\_\_\_\_\_  
Notary