Ohio | Department of Agriculture
Governor John R. Kasich • Lt. Governor Mary Taylor
Director David T. Daniels

Division of Animal Health
Business Section - Bromfield Building
8995 East Main Street, Reynoldsburg, OH 43068
Phone: 614-728-6220 • Fax: 614-752-3065
www.agri.ohio.gov • animal@agri.ohio.gov

Voluntary Restricted Snake Registration Form

As of September 5, 2012, a person possessing a Restricted Snake, as defined in Revised Code Section 935.01, may voluntarily register their Restricted Snake(s) with the Director of the Department of Agriculture. Contact the Ohio Department of Agriculture with any questions.

You may complete sections I-V if registering a Restricted Snake.

I. Person Registering the Restricted Snake(s)

Name:_____

Address:_____

Social Security Number: _____

Federal Employer Identification Number:_____

II. Location of the Restricted Snake(s) *Complete only if different from above section.*

Name: _____

Address:_____

III. Veterinarian Providing Care

Name: _____ Phone Number:_____

Address:_____

IV. Description of Restricted Snake(s)

(Please use attached sheet)

V. Additional Information

Do you plan to seek a license to keep your Restricted Snake(s) when licensing requirements go into effect?

_____

_____

Do you anticipate needing assistance to find a home for the Restricted Snake(s)?

_____

_____

Are you currently aware of any circumstances that would disqualify you from keeping your Restricted Snake(s)?

_____

_____

What type of anti-venom is necessary in the case of a bite? Please identify anti-venom particular to each snake breed. You may attach additional pages if needed.

_____

_____

How was the Restricted Snake acquired?

_____

_____

I hereby acknowledge that I have read this form and affirm that the information contained herein is true and correct to the best of my knowledge.

_____	_____	_____
Signature	Print Name	Date

IV. Description of Restricted Snake(s)

Scientific Name			Common Name		Given Name
Sex	Age	Color	Weight	Distinguishing Marks	Microchip Manufacturer & Number

Scientific Name			Common Name		Given Name
Sex	Age	Color	Weight	Distinguishing Marks	Microchip Manufacturer & Number

Scientific Name			Common Name		Given Name
Sex	Age	Color	Weight	Distinguishing Marks	Microchip Manufacturer & Number

Scientific Name			Common Name		Given Name
Sex	Age	Color	Weight	Distinguishing Marks	Microchip Manufacturer & Number

Scientific Name			Common Name		Given Name
Sex	Age	Color	Weight	Distinguishing Marks	Microchip Manufacturer & Number

Please use additional sheets if needed