

APPLICATION TO REGISTER EQUINE EVENT/ ASSESSMENT REPORT FOR REGISTERED EVENT

(Complete application and return to EMMP at contact information above)

As required by Food and Agriculture Code of California, Chapter 8, Division 11, Sections 24012 and 24015

ASSESSMENT RATE: \$14.00 per equine

76-024A (Rev. 06/22)

EVENT INFORMATION			
Name of Event			Event Number (CDFA use only)
Event Start Date	Start Time	Event End Date	Number of Equines Expected
Facility Name		Facility Address (or Geographic Location)	
City	Zip	County	
Event Type (English, Western, etc.)		Sponsor Organization (if applicable)	

EVENT MANAGER INFORMATION (Primary Event Contact)			
Last Name		First Name	
Mailing Address		City, State	Zip
Primary Phone Number	Alternate Phone or Fax	Email	

ALTERNATE CONTACT (If Applicable)			
Last Name	First Name	Primary Phone Number	Email

PAYMENT INFORMATION

Submit fees either online at
<https://secure.cdfa.ca.gov/egov/emmp>
OR via check payable to: Cashier
CDFA EMMP, P.O. Box 942881,
Sacramento, CA 94271

1. **Number of horses assessed:** _____
2. Fees collected (Line #1 x \$14.00 per horse) _____
3. 10% Interest Penalty* (Line #2 x .10): _____
4. After 30 days* (Line #2 x .015) x # Months: _____
5. **Total Amount Due** (add lines #2 thru 4) _____
6. Check Number _____

*Ten percent (10%) penalty plus interest at 1.5% per month for late payment if report along with applicable fees are not submitted within 15 days of last day of event listed above.

Signature of Person Registering Event	Date