

**Arizona Department of Agriculture  
Animal Disease Traceability Registration  
(For all Arizona Livestock and Poultry owners)**



**Business/Farm Information:**

Business/Farm Name: \_\_\_\_\_

Primary Contact: \_\_\_\_\_

*(Premises Owner) First Name Middle name Last name*

Secondary Contact\*: \_\_\_\_\_

*(\* optional) First Name Middle name Last name*

Business/Farm mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ - \_\_\_\_\_ County: \_\_\_\_\_

Phone number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ ext: \_\_\_\_\_ ( Business  Home  Cell  Fax  Pager)

Phone number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ ext: \_\_\_\_\_ ( Business  Home  Cell  Fax  Pager)

Phone number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ ext: \_\_\_\_\_ ( Business  Home  Cell  Fax  Pager)

Business Type\*:  Individual  Partnership  Incorporated  Limited Liability Corporation

*(\* check one)*  Limited Liability Partnership  Non-profit Organization

**\*Operation Type— (Choose All That Apply to the Entire Business)**

<input type="checkbox"/> <b>Production Unit</b> Farm, Ranch, Flock, Feedlot, Hunting, lease hobby Farm, etc	<input type="checkbox"/> <b>Exhibition</b> Animal Show or Exhibition (e.g. State Fair, National show, etc.)	<input type="checkbox"/> <b>Non- Producer Participant</b> Records animal info and has no association with the animals. E.g. AIN Manager.	<input type="checkbox"/> <b>Rendering</b> Location where animals that died at the farm or in transit are processed.
<input type="checkbox"/> <b>Clinic</b> Location where animals are examined or treated by a veterinarian.	<input type="checkbox"/> <b>Laboratory</b> Location where animals are terminated and carcasses are examined	<input type="checkbox"/> <b>Port of Entry</b> Location where animals are allowed to enter 'into the United States.	<input type="checkbox"/> <b>Slaughter Plant</b> Location where animals are terminated for consumption
<input type="checkbox"/> <b>Tagging Site</b> Location where animals are tagged with an official USDA-approved ID device	<input type="checkbox"/> <b>Market/ Collection Point</b> Livestock market/auction or collection point where animals are sold.	<input type="checkbox"/> <b>Quarantine Facility</b> Location where animals are quarantined.	<input type="checkbox"/>

**Business/Farm Login information (user profile):**

E-mail address\*: \_\_\_\_\_

*(\*for confirmation of registration only)*

**Producer/Contact Signature\*:** \_\_\_\_\_

**Authorized Agent\*:**

*(\* to be completed by authorized agents only)*

Agent Name: \_\_\_\_\_ Date: \_\_\_\_\_

Agent Organization: \_\_\_\_\_

**Premises Information:**

(Primary location where livestock/poultry resides; if you have more than one location and animals are managed separately, you may apply for multiple premises identification numbers)

Premises name/description: \_\_\_\_\_ (example "home place", "heifer place")

Premises Address: Check if same as business/farm mailing address

**OR** (if not the same as business/farm mailing address)

Premises Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ - \_\_\_\_\_ County: \_\_\_\_\_

Premises Type\*:  Producer Unit/Farm  Clinic  Exhibition  Laboratory  Market/collection point

(\* check all that apply)  Non-producer Participant  Port of Entry  Quarantine Facility  Rendering

Slaughter plant  Tagging site

Species at Premises\*:  Cattle and Bison  Swine  Sheep  Goats  Horses  Poultry

(\* check all that apply)  Deer and Elk  Llama  Emu

Legal Land Description\*: \_\_\_\_\_

(\* required if no premises address) Township Range Section

GEO or GPS Coordinates\*: Latitude: \_\_\_\_\_ Longitude: - \_\_\_\_\_

(\* Optional)

If mail is not routinely delivered to the Premises Address, please give driving directions from the closest main intersection.

From the intersection of \_\_\_\_\_ and \_\_\_\_\_

Go	<input type="checkbox"/>	N	<input type="checkbox"/>	NE	<input type="checkbox"/>	E	<input type="checkbox"/>	SE	<input type="checkbox"/>	Miles	<input type="checkbox"/>	Feet
	<input type="checkbox"/>	S	<input type="checkbox"/>	SW	<input type="checkbox"/>	W	<input type="checkbox"/>	NW				
Then	<input type="checkbox"/>	N	<input type="checkbox"/>	NE	<input type="checkbox"/>	E	<input type="checkbox"/>	SE	<input type="checkbox"/>	Miles	<input type="checkbox"/>	Feet
	<input type="checkbox"/>	S	<input type="checkbox"/>	SW	<input type="checkbox"/>	W	<input type="checkbox"/>	NW				
Then	<input type="checkbox"/>	N	<input type="checkbox"/>	NE	<input type="checkbox"/>	E	<input type="checkbox"/>	SE	<input type="checkbox"/>	Miles	<input type="checkbox"/>	Feet
	<input type="checkbox"/>	S	<input type="checkbox"/>	SW	<input type="checkbox"/>	W	<input type="checkbox"/>	NW				
Premises is Located	<input type="checkbox"/>	N	<input type="checkbox"/>	E	Side of the road							
	<input type="checkbox"/>	S	<input type="checkbox"/>	W								

**AZ Brand Number** \_\_\_\_\_

For More Information Call 602-542-0943

Send completed and signed application to :

Arizona Department of Agriculture

1688 W. Adams Street

Phoenix, AZ 85007

Or FAX to: 602-542-4290

Revised 3/10