National Premises ID Application USDA Animal Disease Traceability Registration For Bison, Cattle, Goats, Poultry, Sheep, and Swine

Business/Farm Name:						
Primary Contact:						
Premise Owner's First Name, Midd	le Name, and L	ast Name				
Secondary Contact:						
First Name, Middle Name, Last Nan	ne, and Phone	Number				
Business/Farm Mailing Addre	ess:					
City:	State:	_ State:		: Count	_ County:	
Business/Farm Mailing Addre City: Phone #s: Business		_ Home		Cell:	Fax:	
Email Address:						
Business Type: □Individual	□Partnersh	ip □Incorpo	rated	□Limited Liability Co	orporatio	on
(Check One)					1	
(
Operation Type— (Choose Al	l That Apply	to the Entire	e Bus	iness)		
☐ Production Unit	□ Exhibiti			Non- Producer		Rendering
Farm, Ranch, Flock, Feedlot,		w or Exhibition		Participant		Location where animals
Hunting, Leased Hobby Farm, etc.	(e.g. State F Show, etc.)	air, National		Records animal info and has no		that died at the farm or in-transit are processed
				association with the animals (e.g. AIN Manager)		•
□ Clinic □	Laborat	ory		Port of Entry		Slaughter Plant
Location where animals are	Location wh	nere animals are		Location where animals are allowe	d	Location where animals
examined or treated by a veterinarian	examined	and carcasses are		to enter into the United States		are terminated for consumption
☐ Tagging Site □	☐ Market/	Collection		Quarantine Facility		Other
Location where animals are tagged	Point			Location where animals are		Please explain:
with an official USDA-approved ID device	collection p	narket/auction or oint where		quarantined.		
	animals are	sold				
D • T 0						
Premises Information						
This is the primary location where the limultiple premises ID numbers.	vestock resides. l	f you have more	than or	e location and animals are mana	ged separa	itely, you may apply for
multiple premises in numbers.						
Premises Name/Description: _						
(E.g. home place, heifer place, etc.)						
Premises Address: Check this	boy if it's the	a cama ac tha	huci	acc/form mailing address	e above	
			busii	iess/raim maining addres	ss above	· L
Or, if not the same as the business/farm	•					
Premises Physical Address: _ City:	Stata			County		
City	State	Zıp	·	County		
			_			
Premises Type (Check all that						<u>-</u>
\square Market/Collection Point \square	Non-Produc	er Participan	t □P	ort of Entry \(\subseteq \text{Quaranting}	ne Facili	ty □Rendering
☐ Slaughter Plant ☐ Tagging	Site					
Species at Premises (Check al	that annly)	Cattle &	Ricon	□Swine □Sheen □Go	ate D	oultry

Legal Land land (Required if no	_			and Section					
GEO or GPS Coordinates: Longitude:				Latitude:					
						directions from the			
Go	N	NE	Е	SE		Miles	Feet		
	S	SW	W	NW					
	,	'					"		
Then	N	NE	Е	SE		Miles	Feet		
	S	SW	W	NW					
	1 1	T T	T T						
Then	N	NE	E	SE		Miles	Feet		
	S	SW	W	NW					
	1	I I	~						
Premises is	N		Side of the road						
Located	S	W					_		
Previously Iss	sued Natior	nal Premise	es ID and	or Arizona F	lock ID Number	:			
AZ Brand Nu	mber:								
Issued Breed	Association	Herd Nun	ıber:						
Business Owner's Signature:						Date:			
Applications c	an be faxed	to 602-542	-4290, em	nailed to cvi@a	azda.gov, or maile	ed to:			

Arizona Department of Agriculture

Attn: State Vet's Office 1802 W Jackson St, #78 Phoenix, AZ 85007

For questions, call the State Veterinarian's Office at 602-542-4293.