



Florida Department of Agriculture and Consumer Services
 Division of Animal Industry
 Bureau of Animal Disease Control

MAIL OR FAX COMPLETED FORM TO:

Bureau of Animal Disease Control
 Division of Animal Industry
 Cattle Programs Office
 Room 327, 407 S. Calhoun St.
 Tallahassee, FL 32399-0800
 850/410-0900; Fax 850/410-0957

APPLICATION FOR PREMISES REGISTRATION

Section 585.145, Florida Statutes

ADAM H. PUTNAM
 COMMISSIONER

www.freshfromflorida.com/ai/

NOTE: All documents and attachments submitted with this request are subject to public review pursuant to Chapter 119, F.S.

Business/Farm/Ranch/Stable Account Information

Business/Premises Name _____
 Primary Contact _____
 Mailing Address _____
 City _____ ST _____ ZIP _____
 Business Phone _____ FAX _____
 Mobile Phone _____ Pager _____
 E-mail Address _____
 On-site Contact _____ Business or Mobile Phone _____
(If different from above; Manager, Agent, Stable Manager, etc.)

Premises Information *(Where animals are located or the management headquarters within Florida)*

Physical (911) Address _____
 City _____ ST _____ ZIP _____
 County _____

Primary Business Function *(Please check only one)*

- | | | |
|--|---|--|
| <input type="checkbox"/> Production Unit
<i>(Farm, Ranch, Flock, Equine Facility)</i> | <input type="checkbox"/> Clinic <i>(Location where animals are treated for disease)</i> | <input type="checkbox"/> Market/Collection Point <i>(Backgrounder, Order Buyer, USDA Approved Market, Approved Dealer)</i> |
| <input type="checkbox"/> Exhibition (Fairs, Shows) | <input type="checkbox"/> Quarantine Facility | <input type="checkbox"/> Laboratory |
| <input type="checkbox"/> Slaughter Plant | <input type="checkbox"/> Tagging Site | <input type="checkbox"/> Rendering |
| | <input type="checkbox"/> Port of Entry | <input type="checkbox"/> Non-producer Participant |

Species on Premises *(please check all that apply, excluding wildlife)*

- Bovine => Beef Dairy Bison
 Avian => Chickens Ducks Geese Guineas Pheasants Quail Ratites Turkeys
 Aquaculture Camelid Deer Goats Horses Rabbits Sheep Swine _____

GPS Coordinates to entrance of Premises: Latitude: _____ Longitude: _____

Driving Directions: *(If U.S. Postal Service does not deliver to this address, include directions from major intersection.)*

- From the intersection of: _____ & _____
- Travel Mark One: N NE NW S SE SW E W _____ miles & _____ feet to _____
 - Then Mark One: N NE NW S SE SW E W _____ miles & _____ feet to _____
 - Premise entrance is located on the Mark One: N S E W side of the road.

 Signature of Applicant or Authorized Agent
 Electronic facsimile of signature is accepted in email

 DATE