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| AH-LP-100.docx (rev. 02/2022) |
|  | Wisconsin Department of Agriculture, Trade and Consumer ProtectionLivestock Premises Registration (c/o WLIC)4726 E Towne Blvd. Suite 210Madison, WI 53704Fax: 608-848-4702 |
| Livestock Premises Registration Application |
| (S. 95.51, Wis. Stats. and ch. ATCP 17, Wis. Adm. Code) |
| Please return completed form to the address listed above. |
| 1. Registrant and mailing information If registrant is a business, provide the legal name of that business.
 |
| NAME OF INDIVIDUAL (first name, middle initial, last name) \* OR LEGAL NAME OF BUSINESS (or other legal entity) \*      | REGISTRANT PHONE\* (     )     -      |
| ALL TRADE OR OTHER NAMES\* , if any (d/b/a or “doing business as”)      | COUNTY\*      |
| MAILING ADDRESS      | CITY/VILLAGE/TOWN\*      | STATE\*   | ZIP\*      |
| \*Registrant type: check one: |
| [ ]  Individual (includes a pet owner or ‘hobby farm’) | [ ]  Corporation | [ ]  Partnership | [ ]  Cooperative | [ ]  Limited Liability Company (LLC) |
| [ ]  State or local government entity | [ ]  Tribal entity | [ ]  Trust  | [ ]  Estate | [ ]  Limited Liability Partnership (LLP) |
| 1. Livestock premises address\* If the location does not have an address, see instruction sheet.
 |
| PREMISES DESCRIPTION: (Examples: “milking barn” or “pasture”)      |
| PREMISES ADDRESS: Check here if same as mailing address in Section A and skip to Section C [ ]       | COUNTY      |
| CITY/VILLAGE/TOWN      | STATE\*WI | ZIP\*      |
| OPTIONAL | TOWNSHIP NUMBER (1 – 53N)      | RANGE NUMBER (20W – 30E)      | SECTION NUMBER (1-36)      | ¼ SECTION       | ¼¼ SECTION      |
| GEOGRAPHIC COORDINATESWest (Longitude) (must be between 86.000 and 94.000) | GEOGRAPHIC COORDINATESNorth (Latitude) (must be between 42.000 and 48.000) |
|       |       |
| 1. Livestock premises type\* Check ONE that best applies. If your premises has more than one type of operation, see instruction sheet.
 |
| [ ]  Farm or production unit (Includes hobby farm) | [ ]  Livestock exhibition | [ ]  Clinic | [ ]  Market or livestock collection point | [ ]  Rendering or carcass collection point |
| [ ]  Slaughter establishment | [ ]  Tagging site | [ ]  Laboratory | [ ]  Quarantine facility | [ ]  Non-producer participant (See instruction sheet for definition and examples) |
| 1. Types of livestock or livestock carcasses on premises\* Check ALL that apply.
 |
| Bovine – please specify: | [ ]  Fish (includes all fish kept at a fish farm requiing registration under s. ATCP 10.61) |
|  [ ]  Beef Cattle | [ ]  Goats |
|  [ ]  Dairy Cattle | [ ]  Sheep |
|  [ ]  Bison | [ ]  Swine |
| [ ]  Camelids (includes llamas and alpacas) | [ ]  Equine (includes horses, mules and donkeys) |
| [ ]  Captive cervids (includes deer, elk, moose, caribou, reindeer, and the subfamily musk deer) | [ ]  Poultry (includes domesticated fowl like chickens, turkeys, geese, ducks, guinea fowl, squab, ratites like rheas, ostriches, emus, cassowaries, kiwi, **and captive game birds** like pheasants, quail, wild turkeys, migratory wildfowl, pigeons, and exotic birds raised for hunting, which are raised in captivity |
| All information with an asterisk (\*) is required.Continued on next page |

Page 1 of

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| 1. Contact information List the name of the Primary Contact for the premises. ‘Primary contact’ is the individual who best knows about livestock movement on and off or between the premises locations being registered and can be contacted if there is an animal disease emergency. Check applicable box for each phone number type. If contact does not have a phone number, see instruction sheet. Email is required if you would like to receive your Premises Registration Confirmation card by email. Current cell phone number is required to be able to check premises number by text.
 |
| PRIMARY CONTACT NAME AND PHONE NUMBER \* – Fill in below. |
| FIRST NAME:      | MIDDLE INITIAL:      | LAST NAME:      |
| PHONE\* [ ]  Home [ ]  Business [ ]  Cell (     )     -      | PHONE\* [ ]  Home [ ]  Business [ ]  Cell (     )     -      | E-MAIL (not shared/sold and no spam)      |
| ALTERNATE CONTACT NAME AND PHONE NUMBER – Fill in below (OPTIONAL). |
| FIRST NAME:      | MIDDLE INITIAL:      | LAST NAME:      |
| PHONE\*[ ]  Home [ ]  Business [ ]  Cell (     )     -      | PHONE\* [ ]  Home [ ]  Business [ ]  Cell (     )     -      | E-MAIL (not shared/sold and no spam)      |
| 1. Additional locations (if applicable): All premises are required to have a separate registration. Unique premises registrations for each location ensure you will be notified if there is a disease outbreak in the area of any of your premises.

If you have additional livestock premises locations associated with the same mailing and contact information noted in Sections A and E, you may provide them below. They will be registered separately and you will receive a unique livestock premises code for each location. If you have more than 3 additional locations, contact WLIC at 888-808-1910 or go online to register the remaining premises at [www.wiid.org](http://www.wiid.org) and click on Registration. |
| DESCRIPTION OF LOCATION (Example: “dry cow facility -- 3 miles west of main premises”)      | SPECIES (See Section D for applicable species)      |
| ADDRESS      | CITY/TOWN/VILLAGE      | STATE\*WI | ZIP\*      | COUNTY      |
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| DESCRIPTION OF LOCATION (Example: “heifer facility -- 5 miles southeast of main premises”)      | SPECIES (See Section D for applicable species)      |
| ADDRESS      | CITY/TOWN/VILLAGE      | STATE\*WI | ZIP\*      | COUNTY      |
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| DESCRIPTION OF LOCATION (Example: “finishing barn”)      | SPECIES (See Section D for applicable species)      |
| ADDRESS      | CITY/TOWN/VILLAGE      | STATE\*WI | ZIP\*      | COUNTY      |
| 1. Signature\*
 |
| I declare that I have examined this registration application, and to the best of my knowledge it is true and correct. |
| [ ]  Check here if you prefer to receive your card by regular mail instead of email. |
|       |       |
| SIGNATURE OF REGISTRANT OR AUTHORIZED REPRESENTATIVE | DATE |
|        |       |
| PRINT NAME OF PERSON SIGNING | TITLE OF PERSON SIGNING Examples: “livestock owner” or “Vice President, XYZ Farms, Inc.”) |
| All information with an asterisk (\*) is required.Additional livestock premises registration forms may be obtained by calling (888) 808-1910 or going to www.wiid.org. |
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| FOR OFFICE USE ONLY |
| PREMISES REGISTRATION CODE: |       | [ ]  No livestock | [ ]  Contact Information | [ ]  Renewal |
| DATE REGISTERED:  |       | INITIALS: |       | [ ]  Coordinates | [ ]  Additional Locations | [ ]  Exception |

Page 2 of