



Wisconsin Department of Agriculture, Trade and Consumer Protection
 Division of Animal Health
 2811 Agriculture Drive, P.O. Box 8911, Madison, WI 53708-8911
 Phone: (608) 224-4872

Electronic Identification Tag Reader Program for Dealers and Markets APPLICATION FORM

Wis. Stats. §§95.185, 95.68, 95.69; Wis. Admin. Code §§12.02, 12.03

Part I – Applicant Information:			
DEALER or MARKET REQUESTING READER		DEALER or MARKET REPRESENTATIVE (if applicable)	
DEALER or MARKET STREET ADDRESS		CITY	STATE ZIP
DEALER or MARKET PHONE: () -	CELL PHONE (if applicable): () -	EMAIL:	
DEALER or MARKET LICENSE NUMBER:		OTHER CONTACTS (if applicable):	

Part II – General Information:	
1. Does dealer or market use low frequency (LF) official 840 radiofrequency identification (RFID) in dealer or market animals? <input type="checkbox"/> Yes <input type="checkbox"/> No	
2. Related to question 1, approximately how many animals does this include per week?	
3. Does dealer or market already have a LF RFID reader? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, how many?	
4. Do your dealer or market sales include out of state buyers? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(If no Skip to 9)</i>	
5. If selling to out of state buyers, does your veterinarian use electronic certificates of veterinary inspection? <input type="checkbox"/> Yes <input type="checkbox"/> No	
6. If your veterinarian does not use electronic certificates of veterinary inspection, would they be willing to do so? <input type="checkbox"/> Yes <input type="checkbox"/> No	
7. Approximately how many out of state buyers per week do your dealer or market sales include? (Check one) <input type="checkbox"/> 1-10 <input type="checkbox"/> 11-20 <input type="checkbox"/> 21-30 <input type="checkbox"/> 31-40 <input type="checkbox"/> More than 40	
8. Related to question 7, approximately how many total animals does this include?	
9. Do your dealer or market sales include replacement animals? <i>If yes, approximate number replacement animals per month?</i> <input type="checkbox"/> Yes <input type="checkbox"/> No	
10. Feel free to provide additional information here, including describing how the reader will be used or how additional readers will be used if you already have reader(s). If more space is needed you can use the back side or another sheet:	

Part III – Signature:	
The information provided in this application is true and accurate to the best of my knowledge.	
DEALER or MARKET APPLICANT PRINT NAME	
DEALER or MARKET APPLICANT SIGNATURE	DATE:

Submit completed application to:

Mail: DATCP-Division of Animal Health Attn: Gretchen May, P.O. Box 8911, Madison, WI 53708-8911

Fax: (608) 224-4871

Email: gretchen.may@wisconsin.gov

*Personal information you provide may be used for purposes other than that for which it was originally collected (s. 15.04(1)(m), Wis. Stats.).
 Completing this form is voluntary for persons interested in receiving an RFID (electronic) official ID reader.*