



ADAM H. PUTNAM
COMMISSIONER

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

APPLICATION FOR PREMISES REGISTRATION

Section 585.145, Florida Statutes
Rule 5C-31.006, Florida Administrative Code

SEND COMPLETED FORM TO:

Bureau of Animal Disease Control
Division of Animal Industry
Cattle Programs Office
2232 NE Jacksonville Road
Ocala, Florida 34470
850/509-8040 Office 352/620-7212 Fax
CattleForms@FreshFromFlorida.com

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)*

- Production Unit *(Farm, Ranch, Flock, Equine Facility)*
- Clinic *(Location where animals are treated for disease)*
- Market/Collection Point *(Backgrounder, Order Buyer, USDA Approved Market, Approved Dealer)*
- Exhibition (Fairs, Shows)
- Quarantine Facility
- Laboratory
- Port of Entry
- Slaughter Plant
- Tagging Site
- Rendering
- 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 _____

DATE _____

Electronic facsimile of signature is accepted.