



# North Carolina Department of Agriculture & Consumer Services



## NCDACS Veterinary Division: Premises Registration Form – Website

### Premises Owner Account Information:

Swine Swine Swine  
Check:  ID Tags  Tattoo  Ear Notch Number

Business/Farm Name: \_\_\_\_\_

Primary Contact: \_\_\_\_\_  
(First Name) (Middle Name) (Last Name)

Secondary Contact: \_\_\_\_\_  
(Optional) (First Name) (Middle Name) (Last Name)

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ - \_\_\_\_\_ County: \_\_\_\_\_

Phone Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ ext: \_\_\_\_\_  Business  Home  Cell  Fax  Pager

Phone Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ ext: \_\_\_\_\_  Business  Home  Cell  Fax  Pager

Email: \_\_\_\_\_ (\*For notification purposes only)

Business Type:  Individual  Partnership  Incorporated  LLC  LLP  Government Entity  Non-profit Organization

### Premises Information:

(Primary location where livestock reside-if animals are managed on separate locations, apply for multiple premises ID's.)

Premises Type:  Production Unit / Farm / Ranch  Market / Collection Point  Exhibition  Clinic  Laboratory  
 Non-Producer Participant (ie: DHIA, non-animal prem., etc.)  Slaughter Plant  Other: \_\_\_\_\_

Premises Name: \_\_\_\_\_ (example: heifer place, farm #1, headquarters)

Address Information: Check box if same as mailing address  (Do not check if mailing address is a PO Box or Route and Box Number)

Premises Address: \_\_\_\_\_  
(If different from mailing)

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ - \_\_\_\_\_ County: \_\_\_\_\_

GPS Coordinates at entrance: Latitude N \_\_\_\_\_ ° \_\_\_\_\_ Longitude W \_\_\_\_\_ ° \_\_\_\_\_ (\*optional and if known)

### Species Information: \*\* PLEASE FILL IN QUANTITY (how many animals do you have) per species\*\*

(Check all that apply. Quantities of animals are only reported to the state database. This information is protected by General Statute 106-24.1. This and all other statutes can be viewed at [www.ncleg.net](http://www.ncleg.net). Please see reverse side for more information.)

Cattle:  Beef  Dairy  Bison Qty: \_\_\_\_\_ Goats:  Meat  Dairy  Fiber Qty: \_\_\_\_\_ Sheep:  Meat  Dairy  Fiber Qty: \_\_\_\_\_

Equine:  Horse  Donkey  Mule Qty: \_\_\_\_\_ Camelids:  Alpaca  Llama Qty: \_\_\_\_\_ Cervids: Qty: \_\_\_\_\_

Aquaculture: \_\_\_\_\_ Other Species: \_\_\_\_\_ Qty: \_\_\_\_\_

Poultry:  Chicken  Turkey  Ratite (ostrich and/or emu) Qty: \_\_\_\_\_  Waterfowl/Game bird  Other Qty: \_\_\_\_\_  
(If you grow poultry on contract for a corporation, please indicate production system and corporation for which you grow.)

Poultry Production System:  Broilers  Layers  Breeders  Commercial Toms  Commercial Hens

Integrator/Corporation: \_\_\_\_\_

Swine:  Breeding  Feeding  Nursery Qty: \_\_\_\_\_  Other Qty: \_\_\_\_\_

(If you grow swine on contract for a corporation, please indicate production system and corporation for which you grow.)

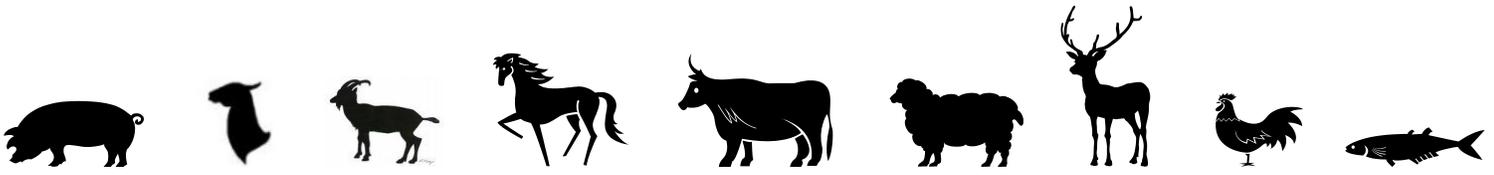
Swine Production System:  Sow  Nursery  Finisher  Sow-Nursery  Sow-Finisher  Isolation Unit  AI/Boar Stud

Integrator/Corporation: \_\_\_\_\_

### Producer/Contact Signature:

Date: \_\_\_\_\_ (\*required)

\*If you need assistance or have questions, please contact the NCFarmID office. (See reverse side for contact information)\*



**NCFarmID Contact Information:**

Mail:  
 NCDA&CS  
 Veterinary Division-NCFarmID  
 1030 Mail Service Center  
 Raleigh, NC 27699-1030

Phone:  
 919-707-3275

Fax:  
 919-733-2277

Email:  
 NCFarmID@ncagr.gov

World Wide Web:  
[www.NCFarmID.com](http://www.NCFarmID.com)

**Useful Links:**

The NCDA&CS Veterinary Division:  
<http://www.ncagr.com/vet/>

The USDA's Process Verified Program (PVP):  
<http://processverified.usda.gov/>

The National Institute for Animal Agriculture:  
<http://www.animalagriculture.org/>

North Carolina General Statute 106-24.1:  
[http://www.ncleg.net/EnactedLegislation/Statutes/HTML/BySection/Chapter\\_106/GS\\_106-24.1.html](http://www.ncleg.net/EnactedLegislation/Statutes/HTML/BySection/Chapter_106/GS_106-24.1.html)

**FOR OFFICE USE ONLY-PLEASE DO NOT WRITE BELOW THIS LINE**

Event/Presentation Date: \_\_\_\_\_

Event/Presentation Name: \_\_\_\_\_

*\*Please remember to send in follow-up forms for any presentations you have given.\**

NCFarmID Federal ID Info	NCDA&CS State Database Information
Date Entered:	Date Entered:
Person Entering Data:	Person Entering Data:
User:	
Password:	
Account Number:	
Federal Premises ID Number:	State Premises ID Number: