



AGENCY OF AGRICULTURE, FOOD & MARKETS
 Division of Food Safety and Consumer Protection

Animal Health Section
 www.agriculture.vermont.gov
 Phone: (802) 828-2421
 Fax: (802) 828-5983

PREMISES REGISTRATION APPLICATION FORM

Return completed form to: Vermont Agency of Agriculture, Food, and Markets 116 State St. Montpelier VT 05620; email to AGR.animalhealth@vermont.gov; fax to (802) 828-5983. If you have any questions, please contact (802) 828-2421.

ACCOUNT CONTACT INFORMATION			
Owner(s) of the Livestock			
First Name (primary contact)	Middle Initial	Last Name	
First Name (alternate contact)	Middle Initial	Last Name	
Business Name (that you operate as/under)			
Mailing Address			
City	State	Zip	County
Main Phone Number		Secondary Phone Number	
Fax Number		Email Address	

PREMISES INFORMATION & DETAILS			
Actual Location of Livestock			
Name and/or Description of Premises			
Physical Address of Premises (street address)			
City	State	Zip	County
Geographic Description of Premises (if known)			
Township			
Latitude (ex: N44.12345)		Longitude (ex: W119.12345)	
Premises Operation Type (check all that apply)			
<input type="checkbox"/> Production Unit (farm or ranch)	<input type="checkbox"/> Clinic	<input type="checkbox"/> Exhibition	<input type="checkbox"/> Laboratory
<input type="checkbox"/> Market / Collection Point	<input type="checkbox"/> Non-Producer Participant	<input type="checkbox"/> Port of Entry	<input type="checkbox"/> Quarantine Facility
<input type="checkbox"/> Rendering	<input type="checkbox"/> Slaughter Plant	<input type="checkbox"/> Tagging Site	
Type of Livestock (check all that apply)			
<input type="checkbox"/> Bison	<input type="checkbox"/> Cattle – Beef	<input type="checkbox"/> Cattle – Dairy	<input type="checkbox"/> Chickens
<input type="checkbox"/> Deer/Elk	<input type="checkbox"/> Goats	<input type="checkbox"/> Horses	<input type="checkbox"/> Llama/Alpacas
<input type="checkbox"/> Poultry – Other	<input type="checkbox"/> Rabbits	<input type="checkbox"/> Sheep	<input type="checkbox"/> Swine
<input type="checkbox"/> Other Livestock: _____			

Signature of Applicant _____	Date _____
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