

Cervid Movement Permit Application
NYS Department of Agriculture and Markets

Part 1 – Premise Information

Premises of Origin:

Owner or Contact Person _____

Farm Name/DBA _____ PIN/LID _____

Physical Address (location) of cervid _____

County _____ Herd Number (required if more than one herd on premise) _____

Mailing address of contact person (only if different from address above) _____

Phone No. _____

Cell No. _____

Fax No. _____

E-mail _____

Premises of Destination:

Owner or Contact Person _____

Farm Name/DBA _____ PIN/LID _____

Physical Address (location) of cervid _____

County _____ Herd Number (required if more than one herd on premise) _____

Mailing address of contact person (only if different from address above) _____

Phone No. _____

Cell No. _____

Fax No. _____

E-mail _____

Total Number of Animals in Shipment _____

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Part 2 – Animal Information

It is unlawful to remove any official state and federal animal identification tags. Call 518-457-3502 with questions.

	Species	Age	Sex	Official ID Eartag (Required)	Type of ID	Unique-Approved ID or Official ID #2 (Required for CWD only)	Type of ID	Additional ID #1 (if applicable)	Additional ID #2 (if applicable)
1									
2									
3									
4									
5									
6									
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20									

Please return completed application to: NYS Department of Agriculture and Markets, Division of Animal Industry – Animal Disease Unit, 10B Airline Drive, Albany, NY 12235; Email: cervidfarm@agriculture.ny.gov; Fax: 518-485-0839 (or 518-485-7773 as back-up). Questions – call 518-457-3502. Failure to complete this application correctly can result in delays or failure to process or approve the permit. Please allow at least five full business days for shipments within New York and additional time for interstate movements.