Scrapie Tag Request Form

Please PRINT all information clearly – Thank you.

Owner/Contact Name: ________________________________

Farm or Ranch Name, if any: _________________________

Physical Address (911 address, where animals are):

Address: _______________________________________
City: ___________________________________________
State: FL ZIP Code: _____________________________ County (animals located in):

Contact Mailing Address (if no USPS (package) delivery to above):

Address: _______________________________________
City: ___________________________________________
State: FL ZIP Code: _____________________________

Work Phone #: ____________________________
Home Phone #: _____________________________
Cell Phone #: ______________________________
Fax #: ______________________________________
E-mail: _______________________________________

Goats □ Number of animals in flock now: _____ Breed(s): ________________________________
Sheep □ Number of animals in flock now: _____ Breed(s): ________________________________

Registered Animals? No □ Yes □
Registered Tattoo Prefix? No □ Yes □ If Yes, list prefix: ________________________________

Name of Breed Registry: _______________________

Number of Official ID tags needed (for the next few months) (circle one):

20 40 60 80 100 or _____ (enter number in lots of 20)

These are 2-part tags that must be separated before being applied (not wrapped around the ear) and should be placed an inch or two from the skull, centered left to right, in clean dry ears.

Return this form to the address below (postage pre-paid envelope enclosed):

USDA, APHIS, VS
8100 NW 15TH Place
Gainesville, FL 32606
Or Fax to 352-313-3062

Signature ____________________________ Date ________