PO BOX 7249, Boise, ID 83707 Telephone: 208-332-8540

Fax: 208-334-4062

GRAZING PERMIT for a BEEF BREEDING HERD

This agreement is for <u>one</u> pasture grazing season, for the cattle, duration, and premises described. Permits are issued on a case-by-case basis. Requests should be submitted to the ISDA, Animal Industry Division <u>at least 15 days before</u> the move.

A copy of the approved permit will be sent to the applicant.

Requested by:			Phone #:				Permit #:				
E-mail:				Fax #:			:				
ORIGIN INFORMATION											
Ranch name:								Premises ID #:			
Actual location:											
ity: County:					State:		te:		Zip Code:		
Directions or Lat/Long:											
Mailing address:											
City: State			e: Zip C			Zip Code	ode:				
Cattle owner:				Phone:							
Manager:					Phone:						
		DESTI	NATION	INFC	RMA	TIC	ON				
Ranch name:								Premises ID #:			
Actual location:											
City: County:					State:			Zip Code:			
Directions or Lat/Long (If address is unknown, a sufficient description is required):											
Mailing address:											
City: State:					Zip C			ode:			
Property owner:					Phone:						
Manager:					Phone:						
		HI	ERD INF	ORM	ATIO	N					
Brand description:					Brand lo			cation:			
Second brand description:					Second l			erand location:			
Other visual identification:											
Approximate date cattle leaving:					Approximate date of return:						
# Cows: # Calves:	# 1	Heifers:		# Bull	s:		# Ste	ers:	# Working horses:		
# years cattle moved to above destination:					Fences Intact and Maintained: Yes ☐ No ☐						
Do cattle graze with other herds? Yes ☐ No ☐					With Whom:						
Destination is in a grazing association Association name:											

HERD HEA	LTH INFORMATIO	N						
Herd veterinarian:	Phone:	Phone:						
Are all female cattle over 12 months of age brucellosis	vaccinated? Yes	No□						
Has herd been infected with or exposed to trichomoni If yes, all bulls will need to meet testing requirements			? Yes □ No □	3				
All herd bulls are required to have had a negative PCR test September 1st. A copy of the test charts must be attached for			Test date:	# Tes	sted:			
Other Disease:		Test d	ate:	# Tested:				
Additional Requirements:								
	NS of AGREEMEN							
I have <u>initialed</u> each of the statements below showing that I had 1Cattle are from a valid beef breeding herd, establist change of ownership. 2There is to be no movement or diversion of cattle through a Diversion Permit signed by both states. 3I will account for all animals on this agreement. 4This agreement is subject to change if the risk of one of oction of the premises of origin with the second of the cattle 18 months and older have the premise of origin with the premise of origin with the premise of origin with the second of the cattle over four (4) months of age entered to a cattle over four (4) months of age entered to a cattle or will be premise of the cattle entering logical or part of a shipment of cattle enter	from the premises I had six many from the premises I had been seen that the premises I had been seen that the premises official identification or igning herd of the animal pring or returning to local cellosis tattoos as evertificate, in additionate. For and certificate and the premise that the premises I had been something to be a premise that the premises I had been something to be a premise I had	nonths, ranave des approvent. In als modelaho are conto the vidence conto the vidence conto the grazioneous i	noving for grazi cribed, unless a ed by the State ving. or will be offici of the vaccinationalid valid permit, are	ing purpose approved in advance. ally brucellon. e required f	osis for all cattle			
Name of Herd Owner or Legal Representative:								
Signature:			Date:					
Comments:			,					
APPROVAL (FC	R OFFICAL USE	ONLY)						
Name of State Official at Origin:								
Title:	Date:	Pate:						
Name of State Official at Destination:								
Title:	Date:							
Issued by:	Date:		Permit #:					

Grazing Permit Checklist

☐ Origin and Destination Information Sections Complete
☐ Complete physical addresses and/or GPS coordinates are included
☐ Herd Information Section is complete
☐ Dates of movement are no more than 6-8 months
☐ Herd Health Information Section is complete
☐ Current season Trich PCR test chart is attached
☐ DSA cattle - Brucellosis test chart is attached
□ Conditions of Agreement are all initialed
□ Owner or Representative has signed
☐ Permit is being submitted at least 15 days before anticipated movement.

Note: Incomplete applications or applications missing required information will cause the permit approval process to be delayed.