displays a valid OM 0579-0393. The tim	B control nurr	ber. The v complete t	alid OMB contro	cy may not conduct or spor I numbers for this information collection is estimated to av- maintaining the data needed	on collection a erage betwee	are 0579-0065, 0579-0 ⁴ en .16 hours and 2 hour	101, 0579-01 s. These tir	27, 0579-014 nes include ti	6, 0579-033	38, and	OMB Approved 0579-0065, 0101, 0127, 0146, 0338, and 0393	
	needed to identify dise	ase infected/	exposed anir	nals S	ee reverse s	side for additional information.						
that are moved to specific locations in order to control and prevent spread of the disease (9 CFR 71 to UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE VETERINARY SERVICES PERMIT FOR MOVEMENT OF RESTRICTED ANIMALS						NO.						
						5. STATE WHERE ISSUED						
USE A SEPARATE FORM FOR EACH SPECIES 1. NAME AND ADDRESS OF SHIPPER OR CONSIGNOR (<i>Include ZIP Code</i>)						6. MOVEMENT TO BE						
						7. MOVEMENT FOR						
2. CONSIGNEE (Destination Name and Address, include ZIP Code)						8. DISEASE 9. STATUS OF ANIMALS						
							No. Reactor	No. Expo	sed	No. Other (Specify)		
3. MOVED FROM (Name and Location of Premise if other than item 1 above)						10. STATUS OF HERD OF ORIGIN 11. STATUS OF AREA OF ORIGIN					OF AREA OF ORIGIN	
4. NAME AND ADDRESS OF OWNER AT TIME CONDITION DIAGNOSED						12. NO. ANIMALS IN THIS SHIPMENT 13. SPECIES (One only)						
						14. TRANSPORTATION VEHICLE LICENSE NO. OR OTHER IDENTIFICATION NO.						
										CLE REQUIRED TO BE CLEANED AND FECTED AT DESTINATION		
VALID ONLY FOR ABOVE DESTINATION						(If yes, items 32, 33, and 34 are applicable)						
COMPLETE			DISEASE	17 OTHER IDENTIFIC		TO BE MOVED COMPLETE			DISEAS	E 0.		
EAR TAG NO.	BREED	SEX	BRAND	(Complete No		EAR TAG NO.	BREED	SEX	BRAND		(Complete No.)	
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			als described	on this permit and find					ents of St		_	
18. SIGNATURE OF INSPECTOR 19. DATE						E ISSUED 20.				VOID AFTER 1. DATE 22. TIME		
I understand that understand that s this permit to acc	it is a violat such animal ompany the	tion of Fe s must co interstate	deral law to m mply with exist e shipment ar		ed herein in ulations go above desc	terstate except in ac verning movement c cribed animals.	cordance v	with the prov	visions of a		Federal regulations. I also will arrange for a copy of	
23. SIGNATURE	24. TITLE 25. DATE SIGNED											
I certify that the animals described on this permit were received and slaughtered/quarantined in accordance with the requirements of the State and Federal regulations on the date indicated in item 29.												
26. PLACE ANIMALS RECEIVED 27. DATE ANIMALS ARRIVED 28. NO. ANIMALS RECEIVED 29. DATE SLAUGHTERED/QUARANTIN										HTERED/QUARANTINED		
30. DATE AND TIME 31. AUTHORIZED SIGNA SEALS BROKEN			TURE		CLEANED 33. SIGNATURE OF INSPECTOR DISINFECTED <i>uired</i>)				34. DATE SIGNED			