According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The valid OMB control numbers for this information collection are 0579-0047, 0579-0065, 0579-0101, 0579-0127, 0579-0146, 0579-0338, 0579-0393, and 0579-0453. The time required to complete this information collection is estimated to average .16 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

OMB Approved 0579-0047, 059-0065, 0579-0101, 0579-0127, 0579-0146, 0579-0338, and 0579-0453

				ne/slaughter purposes. The in prevent spread of the disease			y dise	ase infected/e	xposed ani	imals	See reverse	side for	additional information.
UNIT ANIM	NO.												
PERMIT F	5. STATE WHERE ISSUED												
1. NAME AND A	6. MOVEMENT TO BE												
	☐ INTERSTATE ☐ INTRASTATE												
						7. MOVEMENT FOR							
	QUARANTINE SLAUGHTER												
2. CONSIGNEE (Destination Name and Address, include ZIP Code)						8. DISEASE 9. STATUS OF ANIMALS							
						No. Reactor				No. Expo	No. 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			
4. NAME AND ADDRESS OF OWNER AT TIME CONDITION DIAGNOSED						12. NO. ANIMALS IN THIS SHIPMEN				T 13. SPECIES (One only)			
						14. TRANSPORTATION VEHICLE LICENSE NO. OR OTHER IDENTIFICATION NO.							
										IICLE REQUIRED TO BE CLEANED AND INFECTED AT DESTINATION			
VALID ONLY FOR ABOVE DESTINATION										YES NO If yes, items 32, 33, and 34 are applicable)			
COMPLETE DISEASE OTHER IDENTIFICATION						TO BE MOVE COMPLET		T	T	DISEAS	SF C	THER	IDENTIFICATION
EAR TAG NO.	BREED	SEX	BRAND	(Complete No		EAR TAG N		BREED	SEX	BRANI			complete No.)
	-							1					
	_												
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	-												
	_												
	-												
I certify that I have inspected the animals described on this permit and find them eligible										ments of S			
18. SIGNATURE OF INSPECTOR 19. DAT						E ISSUED 20. TIME ISSUED			VOID AFTER 21. DATE				
I understand that understand that s	it is a viola such anima	ation of Fe	deral law to m emply with exi	R - LIVESTOCK MUST In the string State laws and regret he delivered with the string State laws and regret he delivered with the string State laws are string state.	ed herein in ulations go	terstate except verning movem	in ac	cordance w	ith the pro	ovisions of			
this permit to accompany the interstate shipment and be delivered with the above desc 23. SIGNATURE OF OWNER OF SHIPPER						24. TITLE 25. DATE SIGNED OWNER SHIPPER							
		scribed on	this permit w	ere received and slaught	tered/quara	intined in accord	dance	e with the re	quiremen	ts of the S	tate and F	ederal	regulations on the
date indicated in item 29. 26. PLACE ANIMALS RECEIVED 27. DATE ANIMALS ARRIVED						28. NO. ANIMALS RECEIVED				29. DATE SLAUGHTERED/QUARANTINED			
30. DATE AND TIME SEALS BROKEN 31. AUTHORIZED SIGNA			ATURE	AND	E CLEANED DISINFECTED quired)		33. SIGNA	TURE OF	INSPECTOR			34. DATE SIGNED	