



NATIONAL PREMISES ID REQUEST FORM

Fill out completely

Name and/or Farm Name: _____

Phone Number: _____

Address: _____

City, State/ Zip Code: _____

County: _____

Species Raised/ Sold: Please Select All That Apply

Cattle Sheep Goats Pigs Horses Deer Poultry

Personal Contact Information for Premises / Animal Owners:

Name: _____

Address (if different than Premises Address): _____

Email: _____

Phone: _____

Name: _____

Address (if different than Premises Address): _____

Email: _____

Phone: _____

Please submit via, fax (502) 573-1020 or email to statevet@ky.gov

