



<b>APPROVED TAGGING SITE - KENTUCKY</b>			
<b>Application/Agreement</b>			
<b>APPLICANT INFORMATION</b>			
Name of Entity:			
Person Responsible:			
Address:			
City:		State:	ZIP Code:
Office Phone:		Cell Phone:	
Fax:		Email Address:	
Premises ID or Location Identification Number		I do not have a location identification number. Please issue my location a number. <i>(Check adjacent box)</i>	<input type="checkbox"/>
<b>RESPONSIBILITIES OF APPROVED TAGGING SITE</b>			
<p>The person responsible for the tagging site agrees to administer the tagging of livestock at their location in accordance with the following:</p> <ul style="list-style-type: none"> <li>• Obtain official identification eartags only as directed by the animal health official(s) listed on this agreement.</li> <li>• Unload animals requiring official identification only when the owner or the person in possession, care, or control of the animals brought to the tagging site agrees to have the animals officially identified in accordance with approved tagging site protocols.</li> <li>• Officially identify all animals in accordance with 9 CFR 86, including:               <ul style="list-style-type: none"> <li>○ Officially identify animals required to be identified before commingling with animals from different premises, or use a backtag or other method to accurately maintain the animal's identity until the official eartag is applied. Then the official identification can be correlated to the person responsible for shipping the animal.</li> <li>○ Only apply official eartags to animals <u>not</u> already officially identified (except as provided in 9 CFR 86.4(c))</li> <li>○ Do not remove official identification devices unless authorized by an Animal Health Official (see 9CFR 86.4(d) and (e))</li> </ul> </li> <li>• Maintain tagging records using forms or electronic systems as directed by the animal health officials to include, at a minimum:               <ul style="list-style-type: none"> <li>○ The name, street address, city, State, and ZIP code of the owner or person responsible for the animals tagged.</li> <li>○ The official identification numbers of the tags applied associated with the owner or person responsible for the animals.</li> <li>○ The date the official identification eartags were applied.</li> </ul> </li> <li>• Submit the records of tags applied according to the animal health official as agreed: within 7 days of when the tags are applied.</li> <li>• Ensure the security of official eartags and distribution records by:               <ul style="list-style-type: none"> <li>○ Maintaining a record of all official identification eartags received, distributed, and applied at the tagging site for a minimum of 5 years.</li> <li>○ Keeping the inventory of tags and records in a secure place accessible only to tagging site personnel.</li> <li>○ Immediately reporting any lost or stolen tags to the appropriate State or Federal animal health official.</li> </ul> </li> </ul>			

**RESPONSIBILITIES OF ANIMAL HEALTH OFFICIALS**

The animal health official noted below agrees to:

- Oversee the administration of tagging sites in his or her geographic area as agreed to by State, Federal and Tribal animal health officials.
- Provide the tagging site with an adequate supply of the following official eartags to be applied by the tagging site.
  - National Uniform Eartagging System (NUES) tags ("silver metal clip tag")
  - Animal Identification Number (AIN) tags
- Keep a record of official eartags provided to the tagging site.
- Provide a recording form or system (or both) for the tagging site to maintain as tags are applied, and instructions for reporting tag applied records.
- Provide education and oversight of the distribution record system and inventory control through the normal review process.

**TERMINATION OF AGREEMENT**

This agreement is valid until **June 30 of each year** or until the animal health officials listed on this agreement or their authorized representatives decide approval must be withdrawn or resend this agreement for cause. Renewal is required within 30 days of the expiration date.

**SIGNATURES**

**Tagging Site**

Print Name of Person Responsible		
Signature		Date

**State or Tribal Animal Health Official**

Print Name of Animal Health Official		
Signature		Date

**Federal Animal Health Official**

Print Name of Animal Health Official		
Signature		Date

*Contact for all inquiries regarding Tagging Sites in this State*

**Kentucky Department of Agriculture**  
**Office of State Veterinarian**  
 109 Corporate Drive  
 Frankfort, KY 40601

Office Phone: 502-573-0282

Fax: 502-573-1020

Website: [www.kyagr.com](http://www.kyagr.com)