

Tennessee Department of Agriculture Consumer and Industry Services Animal Health Tennessee Premises Registration Form

Purpose of Form	New Premises Account Updating Existing Premises Account (list account #)									
Contact information										
Business/Farm Name* *Required	*You must list a name for your business/farm									
Primary Contact* Farm Operator *Required	First Name	Middle Name					Last N	lamo		
Mailing Address* *Required	i iistivanie	MIGGIE IVAITE				TN	Lasti	Name .		
nequirea	Street Address	City					County	l	Zip	
Phone Numbers* Include area code *Required	Home	Cell				Work				
Email Address										
Secondary Contact	First Name	Middle Name				Last Name				
PREMISES ID INFORMATION (A premises is the location where animals reside or location of a TAEP project)										
The premises address must be a physical address. DO NOT LIST A POST OFFICE BOX. The address must be a 911 address or supply latitude and longitude for entrance to property. List addresses for all farms that you operate. Attach a separate piece of paper if you need to list additional locations. If the premise does not have a 911 address, please list latitude and longitude in boxes and attach detailed driving directions & premises location number.										
Premises Name and Physical Address	David Nove						70			
Location # 1	Premise Name	Street Address Cit				TN	Zip			
	Premise Name Producer /Farm	Premise Name		Lat.			g.	County		<u>'</u>
Premises Type	Market/Colle	_	Clinic		Exhibition Non-Producer			Laboratory Slaughter Plant		
Species at Premise Check all that apply			/Llama-Alpaca		Caprine/Goat			Equine/Horses		
	Laprine/Rabbits		ne/Sheep		Porcine/Swine			Poultry/Chickens-Tui		
	Ratite/Ostrich-Emu	the species				No animals at this location				
Premises Name and Physical Address	Premise Name	Street Address City				V	TN	Zip		
Location # 2	Tremise Name	One of the				TIN Zip				
LOCATION # 2										
	Premise Name Producer /Farm			Lat. Exhibition			ıg.	Labora	County	′
Premises Type	Market/Collection Poir							Slaughte		_
Species at Premise Check all that apply	Bovine/Bison-Cattle			Llama-Alpaca		Caprine/Goat		Equine/Hors		
	Laprine/Rabbits		ie/Sheep		Porcine/Swine			Poultry/Chick		
	Ratite/Ostrich-Emu	Other lis	the species				No animals at this location			
Premises Name and Physical Address										
Physical Address	Premise Name	Premise Name		Street Address City			У	TN	Zip	
Location #3	Positive Name	nica Nama							0.000	
Premises Type	Premise Name Producer /Farm		Lat. Clinic		E	Exhibition Lon	ig.	Labora	County	
	Market/Colle					n-Producer		Slaughter Plant		
Species at Premise Check all that apply	Bovine/Bison-Cattle	Camelid	Llama-Alpaca		Cap			Equine/	Equine/Horses	
	Laprine/Rabbits	Ovin	ie/Sheep			Porcine/Swine		Poultry/Chickens		
	Ratite/Ostrich-Emu	Other lis	t the species	pecies		No animals at this location				
Owner or Owner Rep	resentative* Name									
Applicant must have permission from landowner to register his/her premises. Signature authorizes agent to input all available data to acquire premises identification - *representative's signature implies owner permission.										
Return Form To: Tennessee Department of Agriculture, Attention: Premises Registration, P.O. Box 40627, Nashville, TN 37204 Telephone: 615-837-5120, Fax: 615-837-5250, Email: animal.health@tn.gov. Your Premises Registration card will be mailed to you.										

To: