

B.C. Premises ID Registration of Livestock and Poultry Premises

Online registration available at www.gov.bc.ca/premisesidprogram

I am:	<input type="checkbox"/> Registering a premises for the first time Please complete all sections.	<input type="checkbox"/> Updating an existing registration for Premises ID: BC _____ Please enter only data that has changed.
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Primary Premises Location: The Primary Premises is the parcel of land defined as the main ranch or home site of an operation. Please complete ONLY ONE of the three boxes below.

BC Land Titles PID: _____ (PID = Parcel Identifier. It is 9 digits and is listed on Property Assessments)	<input type="checkbox"/> See attached copy of Property Assessment Notice (Feel free to black out confidential PIN numbers and valuation data)
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Alternate identifying Information (e.g. legal land description, Crown Land PIN, coordinates, First Nations' Reserve, physical address, map):

Linked Premises: Linked Premises are additional parcels of land within an operation where livestock may be present. Linked premises information will enable emergency responders to more quickly address a livestock disease outbreak. However, only the Primary Premises ID will be required for livestock movement reporting. If applicable, please provide information identifying linked premises on attached sheets or below.

Registrant Information: Person who will be notified of the Premises ID. Please complete only the fields that are applicable.

First Name: _____ Middle Name: _____ Last Name: _____

Legal Business Name: _____ Farm Name: _____

Physical Address: _____

Mailing Address: _____

Town/City: _____ Province: _____ Postal Code: _____

Phone (1): _____ Phone (2): _____ Fax: _____

E-mail (1): _____ Email (2): _____

(Optional) CCIA ACCOUNT ID*: _____ *Issued by the Canadian Cattle Identification Agency (CCIA); ex. A1234567 (not a Premises ID)

Emergency Contacts: Persons responsible for care and control of animals in an animal health or natural disaster emergency.

Primary Contact Same as Registrant OR First Name: _____ Last Name: _____

Address: _____

Town/City: _____ Province: _____ Postal Code: _____

Phone (1): _____ Phone (2): _____ Fax: _____

E-mail (1): _____ Email (2): _____

Secondary Contact Same as Registrant OR First Name: _____ Last Name: _____

Address: _____

Town/City: _____ Province: _____ Postal Code: _____

Phone (1): _____ Phone (2): _____ Fax: _____

E-mail (1): _____ Email (2): _____

Relationship of Registrant to Primary Premises:

- Owner Lessee Licensee User of Commingling Site Operator of Commingling Site
 Renter Manager Livestock Share Owner Other (specify): _____

Premises Type: Select all operations that were conducted in the last year.

- | | | |
|--|---|---|
| <input type="checkbox"/> Farm / ranch | <input type="checkbox"/> Feedlot | <input type="checkbox"/> Pasture (range) |
| <input type="checkbox"/> Community pasture | <input type="checkbox"/> Hobby farm (small acreage) | <input type="checkbox"/> Boarding farm / stable |
| <input type="checkbox"/> Hatchery | <input type="checkbox"/> Zoo / petting zoo | <input type="checkbox"/> Exhibition / Fair ground |
| <input type="checkbox"/> Competition facility | <input type="checkbox"/> Race track | <input type="checkbox"/> Veterinary clinic |
| <input type="checkbox"/> Insemination centre | <input type="checkbox"/> Livestock / poultry research facility | <input type="checkbox"/> Veterinary hospital and / or lab |
| <input type="checkbox"/> Assembly yard | <input type="checkbox"/> Auction market / livestock sale facility | <input type="checkbox"/> Abattoir |
| <input type="checkbox"/> Carcass disposal site | <input type="checkbox"/> Rendering facility | <input type="checkbox"/> Other (specify) _____ |

Species Type: Select all species raised, kept, assembled, or disposed of in the last year within the operation.

For each species selected, indicate the maximum number of animals (all ages, male and female) that were accommodated at one point in time.

	CAPACITY		CAPACITY		CAPACITY
<input type="checkbox"/> Alpacas	_____	<input type="checkbox"/> Elk	_____	<input type="checkbox"/> Poultry: broiler	_____
<input type="checkbox"/> Aquaculture: crustaceans	_____	<input type="checkbox"/> Emu	_____	<input type="checkbox"/> Poultry: hatching egg	_____
<input type="checkbox"/> Aquaculture: molluscs	_____	<input type="checkbox"/> Fur: fox	_____	<input type="checkbox"/> Poultry: pullet	_____
<input type="checkbox"/> Aquaculture: salmon	_____	<input type="checkbox"/> Fur: mink	_____	<input type="checkbox"/> Poultry: table egg	_____
<input type="checkbox"/> Aquaculture: fish other than salmon	_____	<input type="checkbox"/> Fur: other than fox, mink	_____	<input type="checkbox"/> Poultry: turkey	_____
<input type="checkbox"/> Asses	_____	<input type="checkbox"/> Geese in captivity	_____	<input type="checkbox"/> Poultry: (specify) _____	_____
<input type="checkbox"/> Bees (# of colonies)	_____	<input type="checkbox"/> Goats	_____	<input type="checkbox"/> Rabbits	_____
<input type="checkbox"/> Bison	_____	<input type="checkbox"/> Guinea Fowl in captivity	_____	<input type="checkbox"/> Sheep	_____
<input type="checkbox"/> Cattle: beef	_____	<input type="checkbox"/> Horses	_____	<input type="checkbox"/> Swine	_____
<input type="checkbox"/> Cattle: dairy	_____	<input type="checkbox"/> Llamas	_____	<input type="checkbox"/> Vicuna	_____
<input type="checkbox"/> Cervids: domestic	_____	<input type="checkbox"/> Nandu / Rhea	_____	<input type="checkbox"/> Wild boars	_____
<input type="checkbox"/> Deer (White tailed, Mule)	_____	<input type="checkbox"/> Ostrich	_____	<input type="checkbox"/> Wild turkeys in captivity	_____
<input type="checkbox"/> Donkey, Mule	_____	<input type="checkbox"/> Peafowl in captivity	_____	<input type="checkbox"/> Wildlife (specify) _____	_____
<input type="checkbox"/> Doves in captivity	_____	<input type="checkbox"/> Pheasants in captivity	_____	<input type="checkbox"/> Yaks	_____
<input type="checkbox"/> Ducks in captivity	_____	<input type="checkbox"/> Pigeons in captivity	_____	<input type="checkbox"/> Other (specify) _____	_____
		<input type="checkbox"/> Quail in captivity	_____	<input type="checkbox"/> NO LIVESTOCK PRESENT	_____

Use and Disclosure of Information

1. The information you are providing in this Premises Registration Form may be used and disclosed for any of the following purposes:
 - a. Determining the presence of, identifying, preventing, controlling or eradicating a notifiable or reportable disease;
 - b. Assessing and addressing threats to animal health;
 - c. Implementing and maintaining a traceability system; and
 - d. Any other purposes under Sections 17 and 18 of the *Animal Health Act*, and as required by law.

(Print Name)

(Signature)

(Date mm/dd/yyyy)

Mail Registrations to:
 BCPID, Ministry of Agriculture
 1767 Angus Campbell Road
 Abbotsford, BC V3G 2M3

OR Email to:
BCPID@gov.bc.ca
OR Fax to: 604-556-3030

If you have questions:
 604-556-3001
 1-888-221-7141 (toll free)
BCPID@gov.bc.ca

