



Maryland Department of Agriculture
50 Harry S. Truman Parkway
Annapolis, MD 21401
Phone (410) 841-5810



PREMISES REGISTRATION

(Required for tags)

PREM ID# _____
for office use

Business/Farm Account Information: (please print all information)

Farm/Business Name: _____

Primary Contact: _____
First Name Middle Name Last Name

Secondary Contact: _____
(Optional) First Name Middle Name Last Name

Business/Farm Mailing Address: _____

City: _____ State: MD Zip: _____ County: _____

Phone: () - _____ ext: _____ ☐ Business ☐ Home ☐ Cell ☐ Other
(One phone number required, additional numbers are optional)

Phone: () - _____ ext: _____ ☐ Business ☐ Home ☐ Cell ☐ Other

Email Address: _____ (for confirmation purposes only)

Primary Premises:

Operation Type: ☐ Farm/ Producer Unit ☐ Clinic ☐ Exhibition ☐ Laboratory
(Check ALL that apply) ☐ Market/Collection Point ☐ Non-Producer Participant ☐ Port of Entry
☐ Quarantine Facility ☐ Rendering ☐ Slaughter Plant ☐ Tagging Site

Species at Premises: ☐ Dairy Cattle ☐ Beef /Bison ☐ Swine ☐ Equine ☐ Goats
(Check ALL that apply) ☐ Sheep ☐ Poultry ☐ Llamas/Alpacas ☐ Other _____

TAG REQUEST

Tags Requested: Free Cattle RFID Tags ☐ Yes ☐ 25 ☐ 50 ☐ 100 ☐ No

Free Swine RFID Tags ☐ Yes ☐ 25 ☐ 50 ☐ 100 ☐ No

Premises PHYSICAL Address: ☐ Check if same as the Business/Farm Mailing Address

(No PO Box)

City: _____ State: MD Zip: _____ County: _____

If physical address is NOT available, please supply the GEO Coordinates:

Latitude: N _____ Longitude: W _____

Producer/Contact Signature: _____ Date: _____

Return form to: Animal Health/Premises Registration
Maryland Department of Agriculture
50 Harry S. Truman Parkway
Annapolis, MD 21401; or
E-mail: animal.disease.traceability@maryland.gov

For questions, contact:
Phone: 410-841-5810
E-mail: animal.disease.traceability@maryland.gov
Web: http://mda.maryland.gov/animalhealth/Pages/animal_health.aspx