



Farm/Business Account Information:

Farm/Business Name: _____

Primary Contact: _____
First Name Middle name Last name

Secondary Contact*: _____
(* optional) First Name Middle name Last name

Farm/Business Address: _____

City: _____ State: _____ Zip: _____ - _____ County: _____

Phone number: _____ - _____ - _____ ext: _____ (☐ Business ☐ Home ☐ Cell ☐ Fax ☐ Pager)

Phone number: _____ - _____ - _____ ext: _____ (☐ Business ☐ Home ☐ Cell ☐ Fax ☐ Pager)

Phone number: _____ - _____ - _____ ext: _____ (☐ Business ☐ Home ☐ Cell ☐ Fax ☐ Pager)

Business Type*: ☐ Individual ☐ Incorporated ☐ Limited Liability Corporation ☐ Non-profit Organization
(* check one) ☐ Partnership

Operation Type*: ☐ Producer Unit/Farm (Hobby Farm) ☐ Clinic ☐ Exhibition ☐ Laboratory
☐ Market/collection point ☐ Non-producer Participant ☐ Port of Entry
(* check all) ☐ Quarantine facility ☐ Rendering ☐ Slaughter plant ☐ Tagging site

Farm/Business Account Login information:

(If you would like to create your own user name and password to access your information, please fill in this section. If not, we will create a user name and password for you. You can change the user name and password at any time.)

User Name: _____ (must be 8 - 12 characters, case sensitive)

Password: _____ (must be 8 - 12 characters, case sensitive)

E-mail address*: _____
(*for confirmation purposes only)

Producer/Contact Signature*: _____

Authorized Agent*:
(* to be completed by authorized agents only)

Agent Name: _____ Date: _____

Agent Organization: _____

(Contact information will not be sold or given out by WLIC without your prior written consent)

* COMPLETE PREMISES INFORMATION ON BACK PAGE

Premises Information:

(Primary location where livestock resides, if more than one location and animals are managed separately, apply for multiple premises ID's)

Premises name/description: _____ (example "home place", "heifer place")

Premises Address: Check if same as business account address ☐

OR (if not the same as business address)

Premises Address: _____

City: _____ State: _____ Zip: _____ - _____ County: _____

Operation Type*: ☐ Producer Unit/Farm (Hobby Farm) ☐ Clinic ☐ Exhibition ☐ Laboratory
(* check one) ☐ Market/collection point ☐ Non-producer Participant ☐ Port of Entry
☐ Quarantine facility ☐ Rendering ☐ Slaughter plant ☐ Tagging site

Species at Premises*: ☐ Bovine (Cattle and Bison) ☐ Swine ☐ Sheep ☐ Goats ☐ Poultry
(* check all) ☐ Equine (Horses and Donkeys) ☐ Cervidae (Deer and Elk) ☐ Camelids (Llama)
☐ Ratites (Emu) ☐ Fish (Aquaculture) ☐ Ostrich

Legal Land Description*: _____
(* required if no address) Township Range Section

GEO Coordinates*: N _____ Degrees _____, _____ /W _____ Degrees _____, _____
(* Optional)

Additional Secondary Premises Information (optional):

Premises name/description: _____

Premises Address: _____

City: _____ State: _____ Zip: _____ - _____ County: _____

Operation Type*: ☐ Producer Unit/Farm (Hobby Farm) ☐ Clinic ☐ Exhibition ☐ Laboratory
(* check one) ☐ Market/collection point ☐ Non-producer Participant ☐ Port of Entry
☐ Quarantine facility ☐ Rendering ☐ Slaughter plant ☐ Tagging site

Species at Premises*: ☐ Bovine (Cattle and Bison) ☐ Swine ☐ Sheep ☐ Goats ☐ Poultry
(* check all) ☐ Equine (Horses and Donkeys) ☐ Cervidae (Deer and Elk) ☐ Camelids (Llama)
☐ Ratites (Emu) ☐ Fish (Aquaculture) ☐ Ostrich

Legal Land Description*: _____
(* required if no address) Township Range Section

GEO Coordinates*: N _____ Degrees _____, _____ /W _____ Degrees _____, _____
(* Optional)