



PASTURE-TO-PASTURE PERMIT

This agreement is for a Beef Breeding Herd for one (1) pasture grazing season, for the cattle, duration, and premises described. Permits are issued on a case-by-case basis. Requests must be submitted to the CDFA, Animal Health Branch, Livestock Movement section at least 30 days before the move. A copy of the approved permit will be sent to the applicant. Permit #: \_\_\_\_\_

Requested by: \_\_\_\_\_ Return by: [ ] Mail [ ] Fax [ ] E-mail

Phone #: \_\_\_\_\_ Fax #: \_\_\_\_\_ E-mail: \_\_\_\_\_

ORIGIN INFORMATION

Ranch Name: \_\_\_\_\_ Premises ID #: \_\_\_\_\_

Physical Cattle Location/GPS: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Cattle Owner/Manager: \_\_\_\_\_ Phone #: \_\_\_\_\_

Ranch Owner/Manager: \_\_\_\_\_ Phone #: \_\_\_\_\_

HERD AND HERD HEALTH INFORMATION

Brand Description: \_\_\_\_\_ Brand Location: \_\_\_\_\_

Date Leaving: \_\_\_\_\_ Date Returning: \_\_\_\_\_

Official ID: [ ] Yes [ ] No Type of official ID: [ ] Brucellosis tag [ ] Silverbrite [ ] RFID

# Females \_\_\_\_\_ Bred [ ] # Calves \_\_\_\_\_ # Heifers: \_\_\_\_\_ # Bulls: \_\_\_\_\_ # Steers: \_\_\_\_\_

# Years cattle moved to above destination: \_\_\_\_\_

Do cattle graze with other herds? [ ] Yes [ ] No If so, with whom: \_\_\_\_\_

Are fences intact and maintained? [ ] Yes [ ] No

Herd Veterinarian: \_\_\_\_\_ Phone #: \_\_\_\_\_

Are all female cattle over 12 months of age brucellosis vaccinated? [ ] Yes [ ] No

Has the herd been affected with or exposed to trichomonosis within the last 12 months? [ ] Yes [ ] No
If yes, one (1) negative DNA detection or amplification-based trichomonosis test. Attach copy of test charts.

Were all bulls tested for trichomonosis within the last 12 months? [ ] Yes [ ] No

Trich Test date: \_\_\_\_\_ # Tested: \_\_\_\_\_ Attach copy of trichomonosis test charts.

**DESTINATION INFORMATION**

Ranch Name: \_\_\_\_\_ Premises ID #: \_\_\_\_\_

Physical Cattle Location/GPS: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Cattle Owner/Manager: \_\_\_\_\_ Phone #: \_\_\_\_\_

Ranch Owner/Manager: \_\_\_\_\_ Phone #: \_\_\_\_\_

**CONDITIONS OF AGREEMENT**

I understand and agree to all the following (please initial each):

- \_\_\_\_\_ 1. Cattle are from a Beef Breeding Herd, established more than six (6) months, moving for grazing purposes without change of ownership.
- \_\_\_\_\_ 2. All cattle as described in this agreement are accounted for.
- \_\_\_\_\_ 3. The Department may modify the terms of this agreement due to a change in disease risk or status.
- \_\_\_\_\_ 4. Failure to comply with the provisions of this agreement may result in the termination of this Pasture to Pasture Permit and/or refusal to approve any future Pasture to Pasture Permits.
- \_\_\_\_\_ 5. This Pasture to Pasture Permit is good for one (1) seasonal movement (to and return within eight (8) months) and shall expire within eight (8) months from the date signed by the destination state's animal health official.
- \_\_\_\_\_ 6. All sexually intact cattle over 18 months of age bear individual official identification.
- \_\_\_\_\_ 7. No trader or recently assembled cattle are in the origin herd or the animals moving.
- \_\_\_\_\_ 8. All female cattle over 12 months of age entering or returning to California are officially brucellosis vaccinated and bear legible official brucellosis tattoos as evidence of vaccination.
- \_\_\_\_\_ 9. A Brand Inspection Certificate is required for all cattle within the 30 days prior to entering the destination state.
- \_\_\_\_\_ 10. Copies of the Brand Inspection Certificate and the approved Pasture-to-Pasture Permit shall accompany each load or part of a shipment of cattle entering California.

Name of Herd Owner or Legal Representative: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**APPROVAL (FOR OFFICIAL USE ONLY)**

Signature of Origin State Official: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Destination State Official: \_\_\_\_\_ Date: \_\_\_\_\_

Special Instructions: \_\_\_\_\_

**BRAND INSPECTION REQUIREMENTS REMAIN IN EFFECT**