

## National Premises Identification Number Request

The United States Department of Agriculture (USDA), and State agencies in cooperation with producers are developing an initiative, the National Animal Identification System (NAIS), that will enhance existing animal health programs by enabling 48-hour tracing of the movements of any diseased or exposed animal.

The first phase of the program seeks to identify certain properties (premises) where animals are born, managed, marketed, or exhibited. Premises information is needed by animal health officials to quickly and effectively respond to disease incidents. The next phases will focus on animal identification and traceability. The California Department of Food and Agriculture (CDFA) is facilitating the process to obtain National Premises Identification Numbers (NPIN) for premises involved in livestock production or commerce in California. Participation in the program is voluntary.

### Steps to Request a Premises Identification Number (On Page 2 - Back Page)

1. Provide the physical address (PO Boxes are not allowed) for the premises (location) where an animal agriculture activity (i.e., beef ranch, saleyard, poultry ranch, etc.) takes place. This is the location where the animals are housed. If appropriate, you can obtain a separate NPIN for each location where livestock production or commerce occurs.
2. Provide contact information for each premises (name, phone number, etc.). This should be the person that animal health officials will contact in the event of a disease incident.
3. Check the box for the premises primary activity (i.e., Farm or Ranch, Saleyard, Exhibition, etc.). List any additional operations at the premises (i.e., poultry farm with an egg processing operation, etc.).
4. For farms or ranches, check the appropriate box for the primary type of animals at this location (cattle, pigs, sheep, etc.). List all other types of livestock and poultry at the location.

Use a new Page 2 for each additional premises or use it to update information applicable to any section of the form.

You can mail or fax the completed form to CDFA or enter the information on CDFA Web site ([www.californiaid.org](http://www.californiaid.org)). For more information call **(866) 325-5681**

Return completed application to:

**California Department of Food and Agriculture  
Animal Health Branch  
Premises and Animal Identification Program  
1220 N Street, Room A-107  
Sacramento, CA 95814 Or fax to: (916) 653-2215**

FOR OFFICIAL USE ONLY	
User Name	Password
Date Exception Requested (mm/dd/yy)	Date Number Issued (mm/dd/yy)
Account Number - CDFA	National Premises Identification Number

# National Premises Identification Number (NPIN) Request

**\* Indicates Required Information**

Enter your NPIN if you want to update information previously submitted for any section.

## Step 1. Property (Premises) Information *(provide physical location where animals are located)*

* Property Name <i>(Example: Joe's Dairy, Mike's Saleyard, Sunset Veterinary Clinic)</i>			
* Street Address			
* City		* State	* Zip Code
		C A	-
Legal Land Description <i>(if street address is not available)</i>	Township:	Range:	Section:
Coordinates at Entrance <i>(if street address is not available)</i> <small>(use this format)</small>	Lat. 25.0000	Latitude	Longitude
	Long. -117.0000		
* Property Ownership		* Property Affiliation	
<input type="checkbox"/> City <input type="checkbox"/> County <input type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Private		<input type="checkbox"/> Owner <input type="checkbox"/> Lessee <input type="checkbox"/> Renter <input type="checkbox"/> Other	

***If you are not the owner of the property, please provide ownership information***

* Owner's Name (First & Last)			
* Street Address			
* City		* State	* Zip Code
		-	
* Phone		Fax	
( ) -		( )	
Owner's E-mail			

**I certify that I am the owner or an agent of the owner of the property that will be issued an NPIN**

Signature of Person Making Application	Title (Owner, Legal Representative, etc.)	Date of Application (mm/dd/yy)
		/ /

## Step 2- Property Contact Person Information

* Contact's Name (First & Last)			
* Street Address			
* City		* State	* Zip Code
		-	
* Phone		Fax	
( ) -		( )	
Owner's E-mail			

## Step 3. Primary Type of Operation at this Location \* (select only one)

<input type="checkbox"/> Clinic <input type="checkbox"/> Exhibition <input type="checkbox"/> Laboratory <input type="checkbox"/> Market/Collection Point <input type="checkbox"/> Non-Producer Participant <input type="checkbox"/> Port of Entry <input type="checkbox"/> Production Unit <i>(Farm, Ranch)</i> <input type="checkbox"/> Quarantine Facility <input type="checkbox"/> Rendering <input type="checkbox"/> Slaughter Plant <input type="checkbox"/> Tagging Site
<b>List Other Livestock/Poultry Operations at this Location:</b>

## Step 4. Primary Type of Animals at this Location \* (select only one)

<input type="checkbox"/> Alpacas/Llamas <input type="checkbox"/> Bison <input type="checkbox"/> Cattle-Dairy <input type="checkbox"/> Cattle-Beef <input type="checkbox"/> Chickens-Broilers <input type="checkbox"/> Chickens-Layers <input type="checkbox"/> Deer/Elk <input type="checkbox"/> Ducks/Geese <input type="checkbox"/> Emus/Ostrich <input type="checkbox"/> Game Fowl <input type="checkbox"/> Goats <input type="checkbox"/> Horses <input type="checkbox"/> Pheasants/Pigeons/Quails <input type="checkbox"/> Sheep <input type="checkbox"/> Swine <input type="checkbox"/> Turkeys
<b>List Other Types of Livestock/Poultry at this Location:</b>