



Wallace State Office Building • 502 E 9th St, Des Moines, IA 502319 • (515) 281.5321 • www.lowaAgriculture.gov

DATE ANIMALS IOWA OWNER / HAULER STATEMENT FOR SHEEP & GOATS MOVED: Page 1 of 1 (V.4) 100219 NAME AND ADDRESS OF OWNER NAME AND ADDRESS OF HAULER (IF DIFFERENT THAN OWNER) Name:: Name: Address: Address: City/State/Zip: City/State/Zip: Phone: Phone: Flock ID or Premise ID TYPE OF MOVEMENT **GROUP LOT ID NUMBER** Scrapie Flock ID based group/lot ID: flock ID-MMDDYY-sequence number NOTE: An Interstate Certificate of Veterinary Inspection is Example: IA3421-051219-2 required rather than an owner/hauler statement to cross a state line with a sexually intact sheep or goat that is not in slaughter channels and is not moving to a federally approved livestock PIN/LID based group/lot ID: PIN/LID MMDDYY sequence number Example: 004T5670512191 To a federally approved livestock market with sheep or goats that don't have official FOR SHEEP/GOATS MOVING WITHOUT SCRAPIE TAGS To a slaughter establishment If different from the owner, the name, address, and flock ID or PIN of the flock of These animals are in slaughter channels origin (not required for animals under 18 months of age in slaughter channels) **DECLARATION** Breed Class Number of Sheep or Goats? Comments If unknown: for sheep include face color, for Cull ewes/does, replacement ewes/does, Animals goat include type; (milk, meat, fiber) feeder lambs/kids, slaughter lambs/kids, etc. NAME AND ADDRESS OF DESTINATION POINT OF ORIGIN (IF DIFFERENT THAN OWNER) Name: Name: Address: Address: City/State/Zip: City/State/Zip: Owner/Hauler Signature