NAIS PREMISES REGISTRATION

ND DEPARTMENT OF AGRICULTURE
STATE BOARD OF ANIMAL HEALTH
SFN 54250 (2-2005)

For Official Use Only

Account Number: _____

Premises Number: _____

600 E. Boulevard Ave, Dept 602
Bismarck, ND 58505-0020
(701) 328-2350
1-800-242-7535
FAX (701) 328-4567
Dr. Jim Clement - jcclement@nd.gov
Becki Bass - rbass@nd.gov

Premises or Business/Farm/Ranch Account Information
This is the contact information for your livestock business entity. This may be different than the location where the animals are kept.

Business/Farm Name			
Business/Farm Mailing Address			
City	State	Zip Code	County
Business Telephone Number		Business Email	
Primary Contact: First Name	Middle Name		Last Name
Telephone Number		Fax Number or Email	
Secondary Contact: First Name	Middle Name		Last Name
Telephone Number		Fax Number or Email	

Business Type - Optional (for indemnity purposes only)	☐ Individual	☐ Limited Liability Corporation		☐ Non-profit Organization	
	☐ Partnership	☐ Limited Liability Partnership		☐ Incorporated	
Operation Type: (check all that apply)	☐ Producer Unit/Farm/Ranch	☐ Clinic	☐ Exhibition	☐ Quarantine Facility	
	☐ Market/Collection Point	☐ Port of Entry	☐ Tagging site	☐ Slaughter Plant	
	☐ Non-producer Participant	☐ Rendering	☐ Laboratory		
Species at Premises (check all that apply)	☐ Cattle	☐ Bison	☐ Sheep	☐ Goats	☐ Emu ☐ Poultry
	☐ Swine	☐ Horses	☐ Llama	☐ Deer & Elk	☐ Other_____

Premises Information (if different than account information):

Premises Name/Description: (Primary location where animals are housed. i.e. farm/ranch/headquarters, feedlot)			
Premises Address			
City	State	Zip Code	County
Legal Land Description: Township	Range		Section
Name	Telephone Number		Fax Number or Email

Comments:

Producer/Contact Signature	Date