

# Oklahoma NAIS Premise Registration Application

Submit application to:  
The Oklahoma Department of Agriculture, Food and Forestry  
P.O. Box 528804 Oklahoma City, OK 73152



Business/Farm Name: \_\_\_\_\_

Primary Contact: \_\_\_\_\_  
Last Name First Name Middle Initial

Phone Number 1: \_\_\_\_\_

Phone Number 2: \_\_\_\_\_

Business Type: *\*Please check one of the choices below*

- |   |  |
|---|--|
| <input type="checkbox"/> Producer Unit/Farm       | <input type="checkbox"/> Port of Entry       |
| <input type="checkbox"/> Clinic                   | <input type="checkbox"/> Quarantine Facility |
| <input type="checkbox"/> Exhibition               | <input type="checkbox"/> Rendering           |
| <input type="checkbox"/> Laboratory               | <input type="checkbox"/> Slaughter Plant     |
| <input type="checkbox"/> Market/collection point  | <input type="checkbox"/> Tagging Site        |
| <input type="checkbox"/> Non-producer Participant |  |

Species at Premises: *\*Please check all that apply*

- |  |                                       |
|--|---------------------------------------|
| <input type="checkbox"/> Cattle and Bison                | <input type="checkbox"/> Horses       |
| <input type="checkbox"/> Swine                           | <input type="checkbox"/> Deer and Elk |
| <input type="checkbox"/> Sheep                           | <input type="checkbox"/> Llama        |
| <input type="checkbox"/> Goats                           | <input type="checkbox"/> Aquaculture  |
| <input type="checkbox"/> Avian (indicate species): _____ |                                       |

Physical Address: *(must be a Rural Route address or street/county road name)*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Mailing Address:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Signature of Premise Owner

\_\_\_\_\_  
Date