

MANITOBA PREMISES IDENTIFICATION APPLICATION

For Livestock and Poultry

* Required Information

I. Premises Information

A premises is a parcel of land, on which or on any part of which livestock or poultry are grown, kept, assembled or disposed of at any point during the year. When applying for multiple premises attach an additional form for each premises or contact your local Manitoba Agriculture Office for assistance.

Purpose of Application: New Applicant Update – Manitoba Premises Identification Number: _____

1. Land Description*:

Legal Land Description:

NW NE Section _____ Township _____ Range _____ Meridian W E
 SW SE Subdivision description, if applicable _____
(select one)

OR Parish Lot Parcel: Lot Type _____ Lot Number _____ Parish Name _____

AND/OR

Geo-Referenced Coordinates (*decimal degrees*):

Latitude: + . Longitude: - .

Location referenced by coordinates: (*ex: Driveway, Barn Door, etc.*) _____

2. Name or Description of Premises: (*ex: Home Quarter, Summer Pasture, etc.*)

3. Premises Type*: (*select all that apply*)

- | | | | |
|--|---|--|--|
| <input type="checkbox"/> Farm, Stable | <input type="checkbox"/> Hatchery | <input type="checkbox"/> Rendering Plant | <input type="checkbox"/> Veterinary Hospital/Clinic/Lab |
| <input type="checkbox"/> Feedlot | <input type="checkbox"/> Abattoir | <input type="checkbox"/> Zoo, Petting Zoo | <input type="checkbox"/> Insemination Centre |
| <input type="checkbox"/> Pasture | <input type="checkbox"/> Assembly Yard | <input type="checkbox"/> Exhibition, Fair Ground, Racetrack, | <input type="checkbox"/> Livestock/Poultry Research Facility |
| <input type="checkbox"/> Community Pasture | <input type="checkbox"/> Auction, Livestock Sale Facility | Competition Facility | <input type="checkbox"/> Other (specify) _____ |

4. Species Type*:

Select all species that may be present at any time during the year at this location. For each species indicate the maximum capacity (i.e. the maximum number of animals this premises is expected to accommodate). For the other birds and other categories list all applicable species and indicate the maximum capacity for each. Please see the guidelines for a list of the other species to be included.

<input type="checkbox"/> Dairy Cattle capacity: _____ Beef Cattle <input type="checkbox"/> Cow-Calf capacity: _____ <input type="checkbox"/> Backgrounder capacity: _____ <input type="checkbox"/> Feedlot capacity: _____ <input type="checkbox"/> Bison capacity: _____ Pigs <input type="checkbox"/> Weanlings capacity: _____ <input type="checkbox"/> Nursery capacity: _____ <input type="checkbox"/> Feeder capacity: _____ <input type="checkbox"/> Boars capacity: _____ <input type="checkbox"/> Sows/Gilts capacity: _____ Broiler Chickens <input type="checkbox"/> Broiler capacity: _____ <input type="checkbox"/> Breeder Layer capacity: _____ <input type="checkbox"/> Breeder Pullet capacity: _____	Laying Hens <input type="checkbox"/> Layer capacity: _____ <input type="checkbox"/> Breeder capacity: _____ <input type="checkbox"/> Pullet capacity: _____ Turkeys <input type="checkbox"/> Meat capacity: _____ <input type="checkbox"/> Breeder capacity: _____ <input type="checkbox"/> Other Birds capacity: _____ specify _____ <input type="checkbox"/> Sheep capacity: _____ <input type="checkbox"/> Goats capacity: _____ <input type="checkbox"/> Horses capacity: _____ <input type="checkbox"/> Farmed Bees capacity: _____ <input type="checkbox"/> Other capacity: _____ specify _____	
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5. Civic/911 Number:

(Number on sign at driveway – up to six digits)

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II. Contact Information

1.(a) Emergency Contact Information: *(individual responsible for day-to-day operations at premises)*

Name*:	_____	_____	_____
	(First)	(Middle Initial)	(Last)
Business/Farm Name:	_____		
Mailing Address*:	_____		
Town/City*:	_____	Postal Code*:	_____
Home Phone Number*:	_____	Business Phone Number:	_____
Cell Phone Number:	_____	Fax Number:	_____
Email:	_____		

1.(b) Relationship of emergency contact to premises*: *(select one)*

Owner Lessee Operator Renter Other (specify): _____

2. Land Owner Information: *(complete if different than the Emergency Contact)*

Name*:	_____	_____	_____
	(First)	(Middle Initial)	(Last)
Business/Farm Name:	_____		
Mailing Address*:	_____		
Town/City*:	_____	Postal Code*:	_____
Home Phone Number*:	_____	Business Phone Number*:	_____
Cell Phone Number:	_____	Fax Number:	_____
Email:	_____		

III. Notice of Collection of Personal Information

The personal information on this form is being collected for the Premises Identification Program of Manitoba Agriculture under the authority of section 3(1) of the Animal Premises Identification Regulation 104/2010 under *The Animal Diseases Act*, and will be used for one or more of the following purposes, described in section 2(2) of the Regulation:

- | | |
|---|---|
| (a) detecting, preventing, controlling, managing and eliminating disease; | (e) protecting animal health and human health; |
| (b) analyzing the geographical distribution of disease and the epidemiology of disease outbreaks; | (f) emergency planning; |
| (c) conducting assessments and models to prevent disease risk; | (g) eliminating disease barriers to market access; |
| (d) tracking the movement of animals from premises to premises; | (h) checking the accuracy of information collected or provided under this regulation. |

And may be disclosed to the following persons or entities, under section 6(2) of the Regulation:

- (a) a department, branch, office or agency of the Government of Manitoba;
- (b) the Government of Canada or a municipal, provincial or foreign government, or an agency of such a government, or a person or body whose duties and interests include
- (i) protecting the public health
 - (ii) monitoring or reporting on the safety of agricultural inputs, food, livestock or livestock products, or
 - (iii) monitoring or reporting on the biological, chemical and physical integrity of agricultural inputs, food, livestock or livestock products;
- (c) a producer board.

The personal information is protected by the privacy provisions of *The Freedom of Information and Protection of Privacy Act*. Other than in circumstances referenced in this notice the personal information will only be disclosed where authorized by law. If you have any questions concerning the collection, use or disclosure of the personal information, please contact the FIPPA Access and Privacy Coordinator, Manitoba Agriculture at 204-945-0913.

Deliver your completed application to your nearest Manitoba Agriculture Office or send to:

Manitoba Agriculture, Manitoba Premises Identification
204-545 University Crescent, Winnipeg, MB R3T 5S6
Fax: 204-945-4327 Email: traceability@gov.mb.ca

For more information, contact your local Manitoba Agriculture Office or call Manitoba Government Inquiry at 1-866-626-4862 to help locate your nearest Office or email traceability@gov.mb.ca.

