

Application for Indiana Pre-Entry Permit for Cervidae

Submit completed application and all supporting documentation with this application (Certificate of Veterinary Inspection; and verification of status of herd of origin for CWD, tuberculosis, brucellosis, etc.) to the BOAH. **All requirements must be met in order for the application to be processed. Not providing requested information will result in a delay processing the application.**

The application should be submitted to the Indiana State Board of Animal Health office as far in advance of the anticipated movement as possible. **MUST BE SUBMITTED AT LEAST 120 HOURS (5 BUSINESS DAYS) PRIOR TO THE MOVEMENT.**

Movement cannot occur until the pre-entry permit is issued by the Indiana State Board of Animal Health.

1. Indiana Owner (Applicant) Information

Name of applicant: _____
Mailing address of applicant: _____
Indiana destination of cervidae (if other than above): _____
County: _____ Telephone number: _____

2. Herd of Origin Information

Name of owner: _____
Mailing address of owner of herd of origin: _____
Location of cervidae (if other than above): _____
County: _____ Telephone number: _____
Herd veterinarian: _____ **Telephone number:** _____

3. Shipment Information

Species in movement:

- White Tail Sika Red Deer
 Elk Other _____

Sex: Number of Female _____ Number of Male _____

Official identification and Date of Birth (for each animal):
(840 tag or USDA NUES metal tag)

Anticipated date of movement: _____


Applicant Agreement

This application was completed by: _____ on _____
(Printed name) (Date)

I affirm that all information on this application is true and accurate to the best of my knowledge.

I affirm that none of the animals in this shipment originate from or have spent time in a state that has had CWD, in cervids, in the last 5 years.

Signature: _____

	Indiana State Board of Animal Health Discovery Hall Suite 100, 1202 East 38th Street, Indianapolis, IN 46205 317/544-2400; fax:317/974-2011; email: animalhealth@boah.in.gov
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