## Farmed Cervidae Registration Renewal and Inventory

To maintain registered herd status, a complete animal inventory must be conducted and submitted every 12 months. Inventory documents for the annual renewal include:

- Farmed Cervidae Registration Renewal and Inventory cover sheet
- Inventory list of animals currently in herd
- Re-Tagged Farmed Cervidae
- Cervid Mortality Summary

The accuracy of the inventory must be verified by the owner and an accredited veterinarian by signing and submitting the inventory to the board (1721.0380 Subp. 4). Every third year, a physical inventory must be verified by an accredited veterinarian.

| Inventory completed date: | Premises ID: |
| :---: | :---: |


| Premises and Owner/Manager Information | Accredited Veterinarian Information |
| :--- | :--- |
| Premises Address: | Accredited Veterinarian: |
| City, State, Zip: | Clinic: |
| Owner/Manager Name: | Clinic Address: |
| Mailing Address: | City, State, Zip: |
| City, State, Zip: | Phone: |
| Phone: | Email: |
| Email: |  |

## Inventory Summary

| Animal species | Number of each type <br> of animal |
| :---: | :---: |
| Elk |  |
| Reindeer |  |
| Fallow |  |
| Red Deer |  |


| Animal species | Number of each type <br> of animal |
| :--- | :--- |
| Muntjac |  |
| Sika |  |
| Other (specify): |  |
| Other (specify): |  |

## Annual or Physical Inventory (check one)

Annual Inventory: An annual inventory is to be completed every 12 months on years the physical inventories are not required. (MN Rule 1720.0380 Subp.4). Please check the box if you certify that the attached farmed Cervidae annual inventory is complete and accurate as of the date listed.

Physical Inventory: A physical inventory is to be completed every three years by all farmed Cervidae herds (MN Rule 1720.0380 Subp.4). Please check the box if you certify that the attached farmed Cervidae inventory includes the physical verification of all tags and a complete and accurate recording of all identification, age, and sex for every animal in the herd, verified by both you and an accredited veterinarian.

## Owner

I certify that the attached farmed Cervidae Registration Renewal and Inventory, Cervid Mortality Summary and all retag information is complete and accurate as of the date listed. I certify that all herd additions originated from herds with an equal or higher CWD status.

Owner Signature:
Date:

## Accredited Veterinarian

I certify, to the best of my knowledge, that the attached farmed Cervidae inventory is complete and accurate as of the date listed. Veterinarian Signature:

Accreditation number:
Date:

Farmed Cervidae Inventory

| Premises Number: | Premises Name: | Inventory date: |
| :--- | :--- | :--- |

Animals currently in the herd:

|  | Official ID Tag | Tag Color | \|rict | Additional ID | Tag Color | Animal Type | Sex | Date of Birth (mm/dd/yyyy) | Born on Farm? (Check for yes) |
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*Please denote any re-tagged animals on the Re-tagged Farmed Cervidae Form.
(Version 10/2/2023)
Page

## Re-Tagged Farmed Cervidae

| Prem | s Number: | Premises Name: |  | Date: |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 年 | Previous Official ID Tag | Previous <br> Management Tag | New Official ID Tag and Color | New Management Tag and Color | Animal Type | Sex | Date of Birth (mm/dd/yyyy) |
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Mn minnesota
BOARD OF ANIMAL HEALTH

## Cervid Mortality Summary

| Premises Number: | Premises Name: | Date: |
| :--- | :--- | :--- |

- Record all deceased animals under six months of age that were officially identified.
- Record all deceased test eligible animals, six months of age or older, that DID NOT get submitted for CWD testing.
"All farmed Cervidae that are officially identified under six months of age that die, are killed, or moved to slaughter must be reported to the Board within 14 days of death (MN Rule 1720.0420 Subp.1.C).
All farmed Cervidae that are officially identified over six months of age that die, are killed or moved to slaughter must be reported to the Board within 14 days of death (MN Rule 1720.0420 Subp.1.C) and must be tested for CWD at an approved laboratory (MN Rule 1720.0420 Subp.1.D)."


## Animals:

|  | Additional ID | Age | Sex | Species | Date <br> Deceased <br> (mm/dd/yyyy) | Reason Deceased |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: |
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