



Washington State Premises Identification Number (PIN) Registration Application

ACCOUNT / CONTACT INFORMATION			
FIRST NAME (REQUIRED)	M.I.	LAST NAME (REQUIRED)	
NAME OF BUSINESS/FARM (REQUIRED)		ALTERNATE CONTACT NAME	
MAILING ADDRESS (REQUIRED)		E-MAIL ADDRESS	
CITY (REQUIRED)	ZIP (REQUIRED)	COUNTY (REQUIRED)	
PRIMARY PHONE NUMBER (REQUIRED)		CELL OR OTHER PHONE NUMBER	
PREMISES INFORMATION			
<i>Primary physical location where livestock reside. If animals are managed separately on more than one location, apply for multiple PINs using a separate form for each.</i>			
PHYSICAL ADDRESS LOCATION OF ANIMAL(S) (NO P.O. BOXES) (REQUIRED)		<input type="checkbox"/> Check if same as contact mailing address - NO POST OFFICE BOXES -	
CITY (REQUIRED)	STATE (REQUIRED)	ZIP (REQUIRED)	COUNTY (REQUIRED)
<input type="checkbox"/> This is a Farm or Ranch (If not, select type(s) from below)			
<input type="checkbox"/> Clinic	<input type="checkbox"/> Exhibition	<input type="checkbox"/> Laboratory	<input type="checkbox"/> Market/Collection Point
<input type="checkbox"/> Non-Producer Participant	<input type="checkbox"/> Port of Entry	<input type="checkbox"/> Quarantine Facility	<input type="checkbox"/> Rendering
<input type="checkbox"/> Slaughter Plant	<input type="checkbox"/> Tagging Site		
Species at Site (Check All That Apply)			
<input type="checkbox"/> Bovine (Cattle & Bison)	<input type="checkbox"/> Camelid (Alpaca & Llama)	<input type="checkbox"/> Caprine (Goats)	
<input type="checkbox"/> Equine (Horses)	<input type="checkbox"/> Ovine (Sheep)	<input type="checkbox"/> Porcine (Swine)	
<input type="checkbox"/> Poultry (Chickens, Turkeys, Waterfowl, etc.)		<input type="checkbox"/> Ratite (Ostrich & Emu)	
<p>Return form to: Washington State Department of Agriculture Animal Disease Traceability PO Box 42560, Olympia, WA 98504-2560 Phone: (360) 725-5493 • Email: adtwa@agr.wa.gov</p> <p>Visit our website at http://agr.wa.gov/FoodAnimal/AnimalID/ for news or information on Animal ID tags.</p>			