

**SOUTH DAKOTA ANIMAL INDUSTRY BOARD
 411 S FORT STREET
 PIERRE, SD 57501
 (605) 773-3321**

APPLICATION FOR APPROVAL TO FEED RESTRICTED CATTLE

* Feedyard Name	Permit Number AFP	NAIS PREM ID
Feedyard Physical Address	Pen Number(s)	
City/State/ZIP/County	* Telephone (Feedlot) ()	
* Contact Person Name	* Contact Person Telephone ()	
Contact Person Mailing Address	* Directions to Feedlot	
* Private Veterinarian Contact		

I/We request designation as a feedlot or pens (**check one**) approved to hold and feed restricted cattle due to tuberculosis.

1. All cattle entering an approved feedlot or pen are considered restricted and may only be moved directly to a recognized slaughtering establishment or to another feedlot or pen approved by the South Dakota Animal Industry Board. Cattle from an approved feedlot may be shipped through one approved market and then direct to slaughter. Cattle from an approved feedlot may not be sold through a market to any other approved feedlot or other premises other than direct to slaughter.
2. South Dakota Animal Industry Board personnel may periodically inspect the cattle and review the records. For the purpose of this document, the term “cattle” refers to cattle and/or bison. Feedlot and records will be made available for inspection by the South Dakota Animal Industry Board at all times.
3. All cattle permitted for entry into a feedlot or pen approved under this application shall be less than 18 months, officially identified, and records for all animals entering/leaving the approved feedlot or approved pens must be kept and made available upon request by the SD Animal Industry Board including:
 - a. Buyer’s and Seller’s name and address.
 - b. Number of animals.
 - c. Description of each animal including sex, age, breed, and official identification or other identification approved by the SD Animal Industry Board.
 - d. Date of entry and Date shipped for all animals fed.
 - e. Terminal destination of animals.
4. METHODS:
 - a. Approved pens and areas must be separated by a minimum of 30 feet from other pens or areas. No shared watering systems or feed troughs (between approved/non-approved) are allowed in facilities with split status.
 - b. Common or shared handling facilities or equipment must be adequately cleaned and disinfected following processing or handling of known exposed animals.

- c. Workers coming into direct contact with known exposed animals or excrement must change outerwear and disinfect their boots before moving to the unrestricted area. Equipment (including receiving and hospital pens) utilized by or coming into contact with known exposed animals must be cleaned and disinfected as directed by the South Dakota Animal Industry Board before use in or with unrestricted animals
- 5. All records will be maintained for seven (7) years and must be provided to state/federal animal health officials upon request.
- 6. Clean and disinfect pens between groups when directed by the SD Animal Industry Board and upon termination of approval as determined by the SD Animal Industry Board.
- 7. Comply with the requirements set forth in this agreement.
- 8. Provide a diagram showing the layout of the facility. If applying for Approved Pens, please indicate which pens you wish to be considered approved and clearly indicate space distance between approved pens and remainder of premises.
- 9. Immediately provide the SD Animal Industry Board written notice of any change to the physical layout of the facility or when ownership of the facility has changed.

I/We have read and understand the above provisions and acknowledge receiving a copy. I/We understand the approved status expires two (2) years from the approval date and must be renewed for continued approval to feed restricted livestock.

I/We understand that approved status of the feedlot may be cancelled anytime by the SD Animal Industry Board. "Cancellation by the feedlot management must be reported to the SD Animal Industry Board immediately.

Print or type name of owner/manager

 Owner/manager signature and date

***** *For office use only:* *****

Print or type name of SDAIB Vet Supervisor

 SDAIB Vet Supervisor signature and date

Approved Disapproved

 State Veterinarian, SDAIB

 Date Approved