

DairyTrace Declaration Form - Tag Cross-Reference and On-Farm Disposal Event Reporting



DairyTrace Account #: DT 0 _ _ _ _ _

Business Name: _____

Tagging Event Type: Tag Cross Reference

#	*Animal Identifier Number & Farm Management #	Breed (ex.HO)	Sex	*Premises (PID) of Origin	*Date of Tag Application	*Previous Identifier Number & Farm Management #
1	1 2 4 0 0 0 0		<input type="checkbox"/> F <input type="checkbox"/> M		D D M M Y Y	1 2 4 0 0 0 0
2	1 2 4 0 0 0 0		<input type="checkbox"/> F <input type="checkbox"/> M		D D M M Y Y	1 2 4 0 0 0 0
3	1 2 4 0 0 0 0		<input type="checkbox"/> F <input type="checkbox"/> M		D D M M Y Y	1 2 4 0 0 0 0

Tag Retirement Event Type: On-Farm Disposal

#	*Animal Identifier Number & Farm Management #	Breed (ex.HO)	*Date of Death	*Premises (PID) of Death
1	1 2 4 0 0 0 0		D D M M Y Y	
2	1 2 4 0 0 0 0		D D M M Y Y	
3	1 2 4 0 0 0 0		D D M M Y Y	
4	1 2 4 0 0 0 0		D D M M Y Y	
5	1 2 4 0 0 0 0		D D M M Y Y	

I acknowledge that all information reported is correct and that I'm an authorized user on this DairyTrace account.

Client Signature: _____

Date: _____