

APPLICATION FOR SPECIAL CATTLE SALE PERMIT

OKLAHOMA DEPARTMENT OF AGRICULTURE, FOOD, AND FORESTRY (ODAFF) ANIMAL INDUSTRY SERVICES

P.O. Box 528804
Oklahoma City, OK 73152

Phone (405) 522-6141

Fax (405) 522-0756

I, _____ do hereby request permission to hold a Special Cattle Sale under the provisions of
(Print Person Responsible for Sale)

OAC 35:15-9-7 et seq. at _____, on _____
(Location of Sale) (Date)

under the name of _____,
(Name of Sale)

I understand **ALL** cattle present at this sale shall meet the following requirements:

- Tuberculosis:** Dairy Cattle: Negative test within 60 days for **all** sexually intact animals greater than 6 months of age.
Beef Cattle: **Modified Accredited Advanced States (Michigan – Counties of Alcona, Alpena, Montmorency, and Oscoda)** - Negative Test within 60 days for sexually intact animals 18 months of age and older **OR** Accredited Herd number and date of last herd test.
Free States - No Test required

Trichomoniasis: Bulls imported into Oklahoma must have a negative test within 60 days prior to entry. Bulls within the state must have a negative test within 60 days prior to the sale. Exceptions are virgin bulls less than 18 months of age for out of state bulls and 24 months for in state bulls.

Brucellosis: Cattle from Brucellosis Free states do not require a test to enter Oklahoma.

All cattle assigned from out of state must have a Certificate of Veterinary Inspection signed by an accredited veterinarian with USDA approved individual identification, breed, age, and sex of animal.

A spreadsheet is available on the OK Dept of Agriculture website as a guideline for the following required information:

- Name, full address, phone number of seller.
- Name, full address, phone number of buyer.
- Individual ID by USDA approved ear tag for the animal.

Please return this information to Animal Industry Services. An electronic spreadsheet document is preferred.
Please email to icvi@ag.ok.gov

I agree to maintain these records for two years from sale date and make them available for inspection by an authorized agent of the Department.

(Signature)

(Address)

(City) Zip

(Area Code) (Telephone Number)

(Area Code) (FAX Number)

Approved By:

(Animal Industry Official)

(Date)