

Nova Scotia Premises Identification Program Application Form



This form may be used to apply for a Premises Identification (PID) number or to update information related to an existing Premises Identification number. Please remember to request separate PID numbers for separate parcels of land.

- To apply for a new PID, please complete all areas of the form.
- Each premises must have at least a landowner and primary emergency contact identified.
- For an update to an existing PID, please complete all information areas that have been modified and sign the consent to disclose information area at the end of the form.
- More information can be found at novascotia.ca/agri/premisesid

This is an application for a new PID number This is an update for an existing PID number

1. Contacts Landowner and Primary Emergency Contact Must Be Identified

Add any additional contacts on an additional sheet of paper or make an additional copy of this page.

Name _____			
First Name	Middle Name	Last Name	
Business/Farm Name _____			
Mailing Address _____			
City/Town/Community	Province	Postal Code	
Phone _____			
Home Phone	Work Phone	Mobile Phone	
Fax _____		E-mail _____	
Relationship to premises <i>(select all that apply)</i>	<input type="checkbox"/> Landowner	<input type="checkbox"/> Secondary Emergency Contact	
	<input type="checkbox"/> Primary Emergency Contact	<input type="checkbox"/> Other-Specify _____	

Name _____			
First Name	Middle Name	Last Name	
Business/Farm Name _____			
Mailing Address _____			
City/Town/Community	Province	Postal Code	
Phone _____			
Home Phone	Work Phone	Mobile Phone	
Fax _____		E-mail _____	
Relationship to premises <i>(select all that apply)</i>	<input type="checkbox"/> Landowner	<input type="checkbox"/> Secondary Emergency Contact	
	<input type="checkbox"/> Primary Emergency Contact	<input type="checkbox"/> Other-Specify _____	

Name			
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Phone			
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Fax			
E-mail			
Relationship to premises <i>(select all that apply)</i>	<input type="checkbox"/> Landowner	<input type="checkbox"/> Secondary Emergency Contact	
	<input type="checkbox"/> Primary Emergency Contact	<input type="checkbox"/> Other-Specify _____	

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Business/Farm Name			
Mailing Address			
	City/Town/Community	Province	Postal Code
Phone			
	Home Phone	Work Phone	Mobile Phone
Fax			
E-mail			
Relationship to premises <i>(select all that apply)</i>	<input type="checkbox"/> Landowner	<input type="checkbox"/> Secondary Emergency Contact	
	<input type="checkbox"/> Primary Emergency Contact	<input type="checkbox"/> Other-Specify _____	

2. Premises Location

Property Identification Number or Assessment Number: <i>(can be found on your property tax bill)</i>	<table border="1" style="width: 100%; height: 20px; border-collapse: collapse;"> <tr> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> </tr> </table>										
Premises Identification (PID) Number: <i>Please complete this if a PID has already been assigned to this property and you are updating any information related to this existing PID.</i>	<table border="1" style="width: 100%; height: 20px; border-collapse: collapse;"> <tr> <td style="width: 12.5%; text-align: center;">N</td> <td style="width: 12.5%; text-align: center;">S</td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> </tr> </table>	N	S								
N	S										
Civic Address											
	City/Town/Community										
	County										
Location											
	Latitude <i>(if available)</i>										
	Longitude <i>(if available)</i>										
Location Referenced by Coordinates <i>(e.g. driveway, yard, barn, etc.)</i>											
Name or Description of Premises <i>(Farm name if applicable)</i>											
List any additional property identification numbers for locations used solely for pasturing animals											

3. Premises Types *(indicate all applicable)*

- | | | |
|--|---|---|
| <input type="checkbox"/> Abattoir - Federal | <input type="checkbox"/> Exhibition/Fairground | <input type="checkbox"/> Rendering Facility |
| <input type="checkbox"/> Abattoir - Provincial | <input type="checkbox"/> Farm | <input type="checkbox"/> Research Facility |
| <input type="checkbox"/> Assembly Yard | <input type="checkbox"/> Feedlot | <input type="checkbox"/> Stable/Horse Boarding Facility |
| <input type="checkbox"/> Auction Market/Livestock Sales Facility | <input type="checkbox"/> Hobby Farm/Small Acreage | <input type="checkbox"/> Veterinary Clinic/Hospital/Lab |
| <input type="checkbox"/> Carcass/Deadstock Disposal Site | <input type="checkbox"/> Insemination Unit | <input type="checkbox"/> Other <i>(specify)</i> |
| <input type="checkbox"/> Community Pasture | <input type="checkbox"/> Pasture | _____ |
| <input type="checkbox"/> Competition Facility | <input type="checkbox"/> Petting Farm/Zoo | _____ |
| <input type="checkbox"/> Embryo Transfer Facility | <input type="checkbox"/> Racetrack | _____ |

4. Species *(indicate all applicable)*

Maximum capacity is the estimate of the highest number of a given species that this premises could reasonably accommodate. Maximum capacity is not the number of animal currently on the premises.

If updating maximum capacity information or adding a species, please record the updated information and the most current maximum capacity below.

Species Type	Maximum Capacity	Species Type	Maximum Capacity
<input type="checkbox"/> Bison	_____	<input type="checkbox"/> Laying Chickens	_____
<input type="checkbox"/> Broiler Chickens	_____	<input type="checkbox"/> Llamas, Alpacas, Vicuna	_____
<input type="checkbox"/> Cattle: Beef	_____	<input type="checkbox"/> Pigs	_____
<input type="checkbox"/> Cattle: Dairy	_____	<input type="checkbox"/> Purebred/Fancier Flock	_____
<input type="checkbox"/> Cervids (Deer, Elk)	_____	<input type="checkbox"/> Sheep	_____
<input type="checkbox"/> Farmed Rabbits	_____	<input type="checkbox"/> Turkeys	_____
<input type="checkbox"/> Goats	_____	<input type="checkbox"/> Wild Boar	_____
<input type="checkbox"/> Horses (ponies), donkeys, mules	_____		

Other Species	Type	Maximum Capacity
<input type="checkbox"/> Birds - <i>Specify</i>	_____	_____
<input type="checkbox"/> Wildlife (farmed, zoo)- <i>Specify</i>	_____	_____
<input type="checkbox"/> Other - <i>Specify</i>	_____	_____

5. Consent to Disclose Personal Information

Province of Nova Scotia Freedom of Information and Protection of Privacy Act, S.N.S. 1993, c. 5, Clause 26(b)

I, _____, do hereby give consent to the Nova Scotia Department of Agriculture to collect, use and disclose information, including my personal information contained in my Premises Identification Program Application Form and any updated information thereof* to the Canadian Food Inspection Agency, the Chief Veterinary Officer of Canada, Canadian Provincial Chief Veterinary Officers, Government of Nova Scotia and foreign governments, as necessary, to be used for the purposes related to the livestock traceability, including, preventing, preparing for, responding to or recovering from federally and provincially-reportable animal diseases, diseases of significance to animal or public health, natural disaster emergencies and other disasters involving livestock; or to verify the accuracy of information held in the Nova Scotia Premises Identification Program.

*I will provide the necessary updates within 30 days of any change to ensure that the information related to the premises in this Application Form and attached schedules is complete and correct.

Print full name of consenting individual

Signature of consenting individual

Date (yyyy-mm-dd)

Provide the following contact information if not provided elsewhere on this form.

Mailing Address of Consenting Individual

Street/Apartment No./R.R. No.

Community/county

Postal code

Telephone Number of consenting individual (Residence and Business)

E-mail address of consenting individual

Return completed forms to: **Nova Scotia Department of Agriculture**

Animal and Crop Services
Attn: Premises Identification Program
74 Research Drive
Bible Hill, NS B6L 2R2
Call: 902-956-2707
Fax: (902) 893-2757
Email: NSPID@novascotia.ca

Questions?