Georgia Department of Agriculture  
Gary W. Black, Commissioner  
19 MLK, Jr. Drive, Room 105, Atlanta, GA 30334

**Premises Registration Application**

**Business/Farm/Ranch Account Information**

**Business/Premises Name** 
________________________________________________________________________________________

**Mailing Address** 
________________________________________________________________________________________

City ___________ State _______ ZIP ___________ County ______________

**Owner Name** 
________________________________________________________________________________________

**Business Phone** ____________________________ **FAX** ____________________________

**Cell Phone** ____________________________ **Pager** ____________________________ **Email** ____________________________

**Premises Contact** *(Manager, Agent, Stable Manager, etc.)*  
________________________________________________________________________________________

**Business or Cell Phone** 
________________________________________________________________________________________

**Business Type (please check only one)**  
- Individual  
- Incorporated  
- Limited Liability Corporation  
- Partnership  
- Limited Liability Partnership  
- Non-Profit Organization  
- State or Federal Government

**Premises Information** *(Primary location where livestock reside. If animals are managed as separate herds on separate locations without commingling, register multiple premises.)*

**Physical (911) Address** 
________________________________________________________________________________________

City ___________ State _______ ZIP ___________ County ______________

**Primary Business Function (please check only one)**  
- Producer Unit/Farm  
- Exhibition  
- Laboratory  
- Port of Entry  
- Clinic  
- Market/collection point  
- Non-Producer Participant  
- Rendering  
- Slaughter Plant  
- Quarantine Facility  
- Tagging Site

**Species on Premises (please check all that apply)**  
- Cattle  
- Horses  
- Goats  
- Sheep  
- Swine  
- Deer  
- Elk  
- Llama  
- Bison  
- Poultry  
- Chickens  
- Ducks  
- Geese  
- Guinea  
- Pheasants  
- Quail  
- Turkeys  
- Emu

**Signature of Applicant or Authorized Agent:** 
________________________________________________________________________________________  
**Date:** _______________

**MAIL OR FAX COMPLETED FORM TO:**

**Mail:**  
Georgia Department of Agriculture  
Attn: Premises Registration Room 105  
19 MLK, Jr. Drive  
Atlanta, GA 30334

**FAX:**  
404-651-9024  
Attn: Premises ID

Form GAPREID (Rev. 11/12/2013)