



USDA OFFICIAL SILVER ID TAG ORDER FORM

PLEASE TYPE OR PRINT CLEARLY

OWNER INFORMATION			
First Name	Middle Initial	Last Name	
Business Name (that you operate as/under)		Premise ID	
Mailing Address			
City	State	Zip	County
Main Phone Number		Email Address	

ORDER INFORMATION
Quantity of Tags (quantity of tags needed for current year)
Will you Need Application Pliers? (limit one applicator per producer)
Yes <input type="checkbox"/> No <input type="checkbox"/>

I certify that the Official USDA Silver ID tags issued to me will be used on my herd only and I will not redistribute these tags to anyone or use these tags on cattle that do not belong to me.

Producer Signature _____ Date _____

Return completed form to Oregon Department of Agriculture at 635 Capitol St., NE, Salem, OR 97301, AHForms@oda.state.or.us, or fax to (503) 986-4734. If you have any questions, please contact (503) 986-4680.

Office Use Only	
Filled By:	Date:
Prefix:	Tag Range: