



## Pasture-to-Pasture Movement Permit

Oregon Origin Cattle BREEDER HERD Agreement (OAR 603-011-0263)

Please submit 20 days before moving. A copy of this “approved” pasture-to-pasture permit must accompany each load of cattle. This pasture-to-pasture permit replaces a Certificate of Veterinary Inspection (CVI), (except going to Idaho – call for requirements (208) 332-8540). Return completed form by mail to 635 Capitol St NE, Salem, OR 97301, or by email to [AHForms@oda.state.or.us](mailto:AHForms@oda.state.or.us).

### APPLICATION INFORMATION

<b>ANTICIPATED DATE LEAVING OREGON</b>	<b>ANTICIPATED DATE RETURNING TO OREGON</b>	<b>OREGON PERMIT # (Office use only)</b>	
<b>REQUESTED BY</b>		<b>PHONE NUMBER</b>	<b>EMAIL OR FAX NUMBER</b>

### OREGON SHIPPER INFORMATION

### OUT-OF-STATE LOCATION INFORMATION

<b>RANCH NAME</b>				<b>RANCH NAME</b>			
<b>STREET ADDRESS</b>				<b>STREET ADDRESS</b>			
<b>CITY</b>	<b>STATE</b>	<b>ZIP</b>		<b>CITY</b>	<b>STATE</b>	<b>ZIP</b>	
	OR						
<b>DRIVING DIRECTIONS, PREMISE ID, OR LAT/LONG</b>				<b>DRIVING DIRECTIONS, PREMISE ID, OR LAT/LONG</b>			
<b>MAILING ADDRESS</b>				<b>MAILING ADDRESS</b>			
<b>CITY</b>	<b>STATE</b>	<b>ZIP</b>		<b>CITY</b>	<b>STATE</b>	<b>ZIP</b>	
<b>PROPERTY OWNER'S NAME</b>		<b>PHONE NUMBER</b>		<b>PROPERTY OWNER'S NAME</b>		<b>PHONE NUMBER</b>	
<b>MANAGER'S NAME</b>		<b>PHONE NUMBER</b>		<b>MANAGER'S NAME</b>		<b>PHONE NUMBER</b>	



**HERD INFORMATION**

BRANDS & LOCATIONS – PLEASE DRAW YOUR BRAND(S) AND LOCATION(S) HERE

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<b>NUMBER OF ADULT FEMALES</b>	<b>NUMBER OF THEIR CALVES</b>	<b>NUMBER OF THEIR YEARLINGS</b>	<b>NUMBER OF ADULT BULLS</b>
<b>NUMBER OF YEARS CATTLE MOVED TO ABOVE LOCATION</b>		<b>ARE FENCES INTACT AND MAINTAINED?</b> YES <input type="checkbox"/> NO <input type="checkbox"/>	
<b>DO CATTLE GRAZE WITH OTHER HERDS?</b> YES <input type="checkbox"/> NO <input type="checkbox"/>		<b>IF SO, WITH WHOM?</b>	

**HERD HEALTH INFORMATION**

<b>HERD VETERINARIAN</b>	<b>PHONE NUMBER</b>
<b>ARE ALL FEMALE CATTLE OVER 12 MONTHS OF AGE VACCINATED FOR BRUCELLOSIS?</b> YES <input type="checkbox"/> NO <input type="checkbox"/>	
<b>ARE CATTLE TB TESTED? (Attach copy of test results)</b> YES <input type="checkbox"/> NO <input type="checkbox"/>	
<b>MOST CURRENT TEST DATE</b>	<b>NUMBER TESTED</b>
<b>HAS THIS HERD BEEN INFECTED WITH OR EXPOSED TO TRICHOMONIASIS WITHIN THE LAST 12 MONTHS?</b> (If yes, all bulls require 3 neg. cultures or 1 neg. PCR) YES <input type="checkbox"/> NO <input type="checkbox"/>	
<b>HAVE ALL BULLS IN THIS HERD BEEN TESTED FOR TRICHOMONIASIS WITHIN THE LAST 12 MONTHS?</b> (Attach copy of results, indicating which bulls are moving) YES <input type="checkbox"/> NO <input type="checkbox"/>	
<b>MOST CURRENT TEST DATE</b>	<b>NUMBER TESTED</b>
<b>ADDITIONAL REQUIREMENTS</b>	



### CONDITIONS OF AGREEMENT

I have initialed each of the statements below showing that I have read, understand, and agree to the following:

- \_\_\_\_\_ The cattle described herein are from a breeding herd, which has been established more than six months and are moving for grazing purposes without change of ownership.
- \_\_\_\_\_ This agreement may be changed if the risk of disease changes.
- \_\_\_\_\_ I will account for all animals on this agreement.
- \_\_\_\_\_ Cattle must return within six (6) months.
- \_\_\_\_\_ All cattle have official identification.
- \_\_\_\_\_ No trader cattle or recently assembled cattle are in the animals moving.
- \_\_\_\_\_ All female cattle over four (4) months of age entering or returning to Oregon are or will be officially brucellosis vaccinated and bear or will bear legible official brucellosis tattoos in their right ear as evidence of the vaccination.
- \_\_\_\_\_ A brand certificate and an import permit are required for all cattle within 20 days of entering destination state.
- \_\_\_\_\_ Copies of the brand certificate & this pasture-to-pasture permit must accompany each load.
- \_\_\_\_\_ Failure to comply with any provisions of this agreement may result in revocation of the permit and/or loss of any future pasture-to-pasture permits and/or fines.

Signature: \_\_\_\_\_  
Herd Owner or Authorized Representative

Date: \_\_\_\_\_

### APPROVAL

OREGON STATE OFFICIAL	TITLE	DATE

OREGON PERMIT NUMBER	EXPIRATION DATE

OUT-OF-STATE OFFICIAL	TITLE	DATE

OUT-OF-STATE PERMIT NUMBER	EXPIRATION DATE

SPECIAL CONDITIONS OF MOVEMENT (if any)