

## INDIANA OWNER / HAULER STATEMENT FOR SHEEP & GOATS

Required for untagged sheep and goats arriving at markets or for animals in slaughter channels.  
Wethers less than 18 months are exempt.

| NAME AND ADDRESS OF OWNER | NAME AND ADDRESS OF HAULER | NAME AND ADDRESS OF DESTINATION |
|---------------------------|----------------------------|---------------------------------|
| Name: _____               | Name: _____                | Name: _____                     |
| Address: _____            | Address: _____             | Address: _____                  |
| City/State/Zip: _____     | City/State/Zip: _____      | City/State/Zip: _____           |
| Phone: _____              | Phone: _____               | Phone: _____                    |
| Flock ID: _____           |                            |                                 |

### ANIMAL INFORMATION

| Number of Animals | Sheep or Goats | Breed<br><small>(If unknown: for sheep include face color, for goat include type; milk, meat, fiber)</small> | Class<br><small>(Cull ewes/does ram/buck, feeder lambs/kids, slaughter lambs/kids, etc.)</small> |
|-------------------|----------------|--|--|
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For **all** sheep/goats that are moving from a market/sale barn to a **slaughter destination**, a group lot ID number is also required. This number is created by the hauler and using the following format.

- Premises ID based group/lot ID: Premises ID-MMDDYY-sequence number for each day  
**Example: 003PAZT-051219-3 (third load hauled on 5/12/19)**  
(A Premises ID can be obtained from BOAH at no cost.)

|                            |  |                            |
|----------------------------|--|----------------------------|
| <b>Group Lot ID Number</b> |  | <b>Date Animals Moved:</b> |
|----------------------------|--|----------------------------|

|  |                          |
|--|--------------------------|
| <b>Owner/Hauler Signature</b><br><br>_____<br><br>I do hereby certify that the information stated above is correct and the livestock listed are properly classified. | <b>Date</b><br><br>_____ |
|--|--------------------------|