

COLORADO/NEBRASKA COMMUTER CATTLE AGREEMENT

The animals being moved must be accompanied by a Certificate of Veterinary Inspection (CVI) issued prior to movement and a copy of this Commuter Cattle Agreement. The commuter agreement number is to be written on the CVI.

All adult commuter cattle shall be officially identified with an approved eartag. The official ID eartag numbers of the commuter cattle are not required to be individually listed on the CVI. However, a master list of official ID eartag numbers for all adult cattle that might move under this agreement must be on file with Colorado Department of Agriculture (CDA) and Nebraska Department of Agriculture (NDA) prior to approval of the agreement.

All Trichomoniasis test results and laboratory diagnostic reports for bulls 18 months of age and older MUST accompany the application. The commuter agreement will only be considered after the most recent Trich test results and the previous year's Trich test results are provided for review. Trich test results from the entire bull battery shall be included. Your application will not be approved if all test information is not furnished or if testing dates are not within the acceptable guidelines. Bulls returning to their state of origin after grazing will not need a negative Trich test to return.

This permit must be renewed in writing on a yearly basis; the State Veterinarian's Office in the state of origin must receive applications at least two weeks prior to movement.

The following Commuter Cattle Agreement, when submitted and signed by the owner and approved by the State Animal Health Officials of Colorado and Nebraska, will allow for the movement of your herd and their offspring. Commuter permits are for bonafide breeding herds only – NO TRADER CATTLE.

APPLICATION INSTRUCTIONS: Sections I and II are to be completed by the herd owner and submitted by mail, fax, or e-mail to the State Veterinarian's Office at CDA. Section III will be completed by the State Animal Health Officials.

BY TYPING OR SIGNING YOUR NAME ON THE SIGNATURE LINE, YOU ARE VERIFYING THAT ALL PROVIDED INFORMATION IS CORRECT.

COLORADO: Dr. Keith Roehr, State Veterinarian
305 Interlocken Parkway
Broomfield, CO 80021
Phone: 303-869-9130
Fax 303-466-8515
E-mail: animalhealth@state.co.us

NEBRASKA: Dr. Dennis Hughes, State Veterinarian
P.O. Box 94787
Lincoln, NE. 68509-4787
Phone: (402) 471-2351
Fax: (402) 471-6893

COMMUTER HERD PERMIT NUMBER CO-NE2K20-_____

SECTION I

COLORADO INFO:

Name: _____ Ranch Name: _____
Phone Number _____ Home [] Cell [] Fax: _____
E-mail Address: _____
Physical Address of Cattle: _____ City: _____ Zip: _____
County: _____ USDA Premises ID# (if applicable): _____

No. of cattle to be pastured in Nebraska: Cows: _____ Calves _____ Heifers _____ Bulls _____

Are all females OCV (Bangs vaccinated)? _____ Are all bulls in the herd Trich tested? _____

NO COMMINGLING WHILE IN NEBRASKA

NEBRASKA INFO:

Property Owner Name: _____ USDA Premises ID (if applicable): _____

Physical Address/Lat. & Long./Location: _____

Anticipated Date of First Movement into NE: _____ Expected Date of Return to CO: _____

SECTION II - Please read carefully and sign below

- 1. I agree to move only cattle from my breeding herd, including breeding bulls, cows, and their calves. Purchased feeder or other temporary use cattle (trader cattle) are not allowed to be included on this permit.
2. I agree to have all bulls tested for Trichomoniasis upon return to Colorado, after having been separated from female cattle for one month.
3. I agree to any necessary testing that may be required as a result of my herd being exposed (in either state) to Brucellosis, Tuberculosis, or any other disease.

HERD VETERINARIAN (Please Print): _____ Tele: _____

Address: _____ City: _____ Zip: _____

PRODUCER SIGNATURE: _____ Date: _____

SECTION III - FOR OFFICIAL USE ONLY

APPROVAL - STATE OF ORIGIN

The above cattle owner is approved for the movement of his/her cattle between Colorado and Nebraska, as requested in this agreement for pasture.

_____ CO State Animal Health Official
Date Signature

APPROVAL - STATE OF DESTINATION

Upon the recommendation of your State Animal Health Official, I hereby approve your application for the movement of cattle as specified and under the terms and conditions specified in your application.

_____ NE State Animal Health Official
Date Signature