COLORADO/NEW MEXICO SHEEP COMMUTER HERD AGREEMENT

This permit must be renewed in writing on a yearly basis; the State Veterinarian’s Office at the Colorado Department of Agriculture (CDA) must receive applications at least two weeks prior to movement.

The owner is to call the New Mexico Livestock Inspector on arrival, and again before departure in the fall, for a flock inspection.

The following Commuter Sheep Agreement, when completed and signed by the owner and the State Animal Health Officials of Colorado and New Mexico, will allow for the movement of your ewe flock and their offspring without testing for epididymitis. Commuter permits are for bonafide breeding herds.

APPLICATION INSTRUCTIONS: Sections I and II are to be completed by the 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

NEW MEXICO:  Dr. Ralph Zimmerman, State Veterinarian
300 San Mateo Boulevard Northeast, Suite 1000
Albuquerque, NM 87108
Phone: 505-841-6161
Fax: 505-841-6160
E-mail: statevet@nmlbonline.com

PRODUCER INFORMATION ONLY. DO NOT SEND BACK COVER LETTER WITH APPLICATION.
SHEEP COMMUTER HERD AGREEMENT

PERMIT NUMBER CO-NM2K20-___________

SECTION I

COLORADO INFO:
Name: ______________________________________  Ranch Name: ______________________________________
Home/Cell Phone: __________________________  Fax: ________________________________________________
E-mail: ________________________________________________________________________________________
Physical Address of Sheep: _______________________________ City: ___________________ Zip: _____________
County: _________________________________ USDA Premises ID (Required): ____________________________

Number of sheep to be pastured in New Mexico:  Ewes ______   Lambs ______   Rams ______

NEW MEXICO INFO:
Property Owner Name: ____________________________________ County: ________________________________
Physical Address: ________________________________ City: ______________________ Zip: _________________
USDA Premises ID (Required): ___________________  NM Brand/Holding Brand # (Required):  _______________
Date of Movement into New Mexico: ___________________ Date of Return to Colorado:  _____________________

SECTION II – Please read carefully and sign below

1. I agree to move only sheep from my breeding herd (ewes, lambs, and rams).
2. I agree to treat these sheep for scabies as may be required by either or both states.
3. If the sheep become infected or exposed to bluetongue, foot rot, sore-mouth, or scabies in either state, I will agree
to any necessary testing or treatment as may be required.

HERD VETERINARIAN (Please Print): _______________________________ Phone:  _______________________
Address: __________________________________ City: __________________________ Zip: __________________

PRODUCER SIGNATURE: __________________________________________ Date:  ______________

*SECTION III- FOR OFFICIAL USE ONLY**************************

APPROVAL – STATE OF ORIGIN
The above sheep owner is approved for the movement of his/her sheep between Colorado and New Mexico, as requested in this agreement for pasture.

___________ CO State Animal Health Official  ______________________________________________
Date                                                                                                        Signature

APPROVAL – STATE OF DESTINATION
Upon the recommendation of your State Veterinarian, I hereby approve your application for the movement of
sheep as specified and under the terms and conditions specified in your application.

___________ NM State Animal Health Official  ______________________________________________
Date                                                                                                        Signature