

## **COLORADO/NEW MEXICO COMMUTER CATTLE AGREEMENT**

The State Veterinarian's office must receive applications at least **TWO WEEKS** prior to movement.

**All necessary test information, including Trichomoniasis test results for bulls 12 months of age and older, MUST accompany the application.** If you have purchased cattle from another producer please include those test results. Your application will be returned if all test information is not furnished or dates are not within guidelines.

The following Commuter Cattle 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 beef herds and their offspring.

The animals being moved **MUST BE ACCOMPANIED** by a Certificate of Veterinary Inspection and a Brand Inspection Certificate issued prior to movement, as well as a copy of this Commuter Cattle Agreement. This number is also to be written on the Certificate of Veterinary Inspection.

This permit must be renewed in writing on a YEARLY BASIS.

Commuter permits are for bonafide breeding herds only – NO TRADER CATTLE.

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

**INSTRUCTIONS:** Sections I and II are to be completed by the herd owner. Section III will be completed by the State Veterinarians.

**COLORADO:** DR. KEITH ROEHR, STATE VETERINARIAN  
305 INTERLOCKEN PARKWAY  
BROOMFIELD, CO 80021  
PHONE: 303-869-9130 FAX 303-466-8515  
E-MAIL [patricia.menchaca@state.co.us](mailto:patricia.menchaca@state.co.us)

**NEW MEXICO:** ELLEN MARY WILSON, D.V.M., STATE VETERINARIAN  
300 SAN MATEO BLVD NE, STE 1000  
ALBUQUERQUE, NM 87108  
PHONE: 505-841-6161 FAX 505-841-6160  
E-MAIL: [statevet@nmlbonline.com](mailto:statevet@nmlbonline.com)

**PLEASE E-MAIL, FAX, OR MAIL APPLICATION TO THE STATE VETERINARIAN'S OFFICE IN THE STATE OF ORIGIN.**

**PRODUCER INFORMATION ONLY. DO NOT SEND BACK COVER LETTER WITH APPLICATION.**

COMMUTER HERD PERMIT NUMBER CO-NM2K16-\_\_\_\_\_

**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# (required): \_\_\_\_\_

No. of cattle to be pastured in New Mexico: Cows: \_\_\_\_\_ Calves \_\_\_\_\_ Heifers \_\_\_\_\_ Bulls \_\_\_\_\_

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

Does this herd co-mingle with anyone else's herd in NM? \_\_\_\_\_

If yes, name/grazing association \_\_\_\_\_

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**NEW MEXICO INFO:**

Property Owner Name: \_\_\_\_\_ Address: \_\_\_\_\_

County: \_\_\_\_\_ USDA Premises ID# (required): \_\_\_\_\_

Current New Mexico Master Brand Number (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 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 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 cattle as specified and under the terms and conditions specified in your application.

\_\_\_\_\_ NM State Animal Health Official \_\_\_\_\_

Date

Signature