

Animal Health Division 1900 Kanawha Blvd E. Charleston, WV 25305-0170

Farmed Cervid Facility IN-STATE TRANSFER REQUEST

		PR	OPOSED	TRANSFER DATE	S START:	E	ND:	
RECEIVING FACILITY								
Facil	ity License #		Email:					
Busi	ness Owner:	Address:						
City:		State:Zip:Coun			County:	Phone:		
Signature:		Printed Name:				Date:		
ORIGIN FACILITY								
Facil	ity License #	Email:Email:						
Business Owner: Address:								
City:		State: Zip:			County:P		Phone:	
Signature:		Printed Name:				Date:		
	Species	Sex	Age	Official ID		Farm Tag	Remarks	
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