

Iowa Sheep and Goat Owner/Seller Statement

Owner/Seller Name: _____ Flock ID # _____

Address: _____ City: _____

County: _____ Phone: _____

Flock Owner? ____ YES ____ NO Dealer? ____ YES ____ NO

Number of sheep presented _____ Number of goats presented _____

Are all sexually intact animals that require ID officially Identified? ____ YES ____ NO *

Market/Buyer: _____ WAVERLY SALES COMPANY _____ Date: _____

Owner/Seller Certification: *I certify that the sexually intact animals represented on this form are not known to be scrapie positive, suspect, high-risk, or exposed animals, and did not originate from a known infected source, exposed, or noncompliant flock. I agree to keep records as to the origin of these animals for five (5) years.*

Owner/Seller Signature: _____

*Licensed Market/Dealer: record tags applied _____ to _____

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