



NEW OR EXISTING ACCOUNT INDICATOR SALES FORM (DEALER)

RETURN by email at info@canadaid.ca or fax to 403-275-1668

or by mail to 7171-107 Avenue SE Calgary, AB T2C 5N6

***REQUIRED INFORMATION**

INDICATOR PURCHASER: New/existing Canadian Livestock Tracking System database user account information

DEALER INFORMATION

CLTS ACCT ID* _____

NAME _____
FIRST LAST

COMPANY* _____
(IF APPLICABLE)

ADDRESS _____
PO BOX SITE RR

STREET

CITY PROV POSTAL CODE

PHONE* _____

FAX* _____

EMAIL _____

PREMISES ID _____
(IF APPLICABLE)

PRODUCER INFORMATION

CLTS ACCT ID _____

NAME* _____
FIRST LAST

COMPANY (FARM NAME) _____
(IF APPLICABLE)

ADDRESS* _____
PO BOX SITE RR

STREET

CITY PROV POSTAL CODE

PHONE* _____

ALTERNATE PHONE _____

EMAIL _____

PREMISES ID _____

NOTE: AN EMAIL ADDRESS IS REQUIRED TO CREATE A PASSWORD FOR YOUR NEW CLTS DATABASE ACCOUNT

***Species on Premises**

- Beef
 Bison
 Sheep
 Cervid
 Dairy Goat
 Fibre Goat
 Meat Goat
 Other Goat

Approved Indicator Range START	Approved Indicator Range END	Quantity

By submitting this form, I **certify**, to the best of my knowledge and ability, that the information provided on this form is complete, true and correct. I **consent** to the use and disclosure of the information provided on this form by Canadian Cattle Identification Agency for the purposes indicated on this form; to update my Canadian Livestock Tracking System database account; to contact me to either confirm the information I have provided; for follow up; and/or for regulatory reporting required under Part XV of the *Health of Animals Regulations* (C.R.C., c.296) or reporting to the relevant authorities; where required. I **acknowledge** that any other information provided, unless disclosed in the manner and for the purposes to which I have consented above, will be subject to the confidentiality and disclosure provisions of applicable privacy legislation.