INDICATOR RETIREMENT REQUEST FORM

RETURN WITHIN 30 DAYS by email at info@canadaid.ca or fax to 403-275-1668
or by mail to **7646 – 8 Street, N.E. Calgary, Alberta T2E 8X4**

The Indicator Retirement Request Form is to be used to report the retirement of an animal identification number of an approved indicator (tag) applied to an animal that has been slaughtered.

CLTS Account ID # | A | | | | | | | | **DATE** _____

CLTS Account Name _____

Business/Farm Address _____ Premises Identification _____
PO BOX SITE RR

_____
STREET

_____
CITY PROV/TERR POSTAL CODE

Main Telephone _____ Fax _____

Email _____

TAG NUMBER	DATE	TAG NUMBER	DATE

Internal Use Only
CCIA REP: _____ Legal Counsel: _____ Transaction ID: _____

Date Received: _____ Date Approved: _____ Date Closed: _____

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.