



**APPROVED TAG/ANIMAL INDICATOR QUALITY CONTROL FORM-FILLABLE**

**RETURN** by email at [info@canadaid.ca](mailto:info@canadaid.ca) or fax to 403-275-1668

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

*(Please download form and save on your desktop before filling out)*

Please complete and print this form for each indicator-related complaint. When possible, send samples of problem indicators marked to the attention of Canadian Cattle Identification Agency's (CCIA) CSR Team Lead at 7171-107 Avenue SE Calgary, Alberta T2C 5N6.

Send completed forms marked to the attention of CCIA's CSR Team Lead at the address listed above or by facsimile to 403-275-1668.

**IMPORTANT NOTE:** You may be contacted in the investigative follow-up process.

Name		Main Telephone									
Alternate Telephone		Fax									
Email											
Address											
1	Date of complaint (YYYY/MM/DD)										
2	Name and organization of person receiving complaint (if not CCIA, directly) Name _____ Organization _____										
3	<table border="1"> <tr> <td>CLTS Account ID #</td> <td>A</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>			CLTS Account ID #	A						
CLTS Account ID #	A										
4	<b>* Type of livestock operation</b> <input type="checkbox"/> Cow/Calf <input type="checkbox"/> Feedlot <input type="checkbox"/> Backgrounder										
5	Where did you purchase the approved indicators? _____ Name _____ Location of retailer _____										
6	<b>* Brand/manufacturer</b> <input type="checkbox"/> Allflex <input type="checkbox"/> ComfortEar <input type="checkbox"/> Destron <input type="checkbox"/> Shearwell <input type="checkbox"/> Y-Text <input type="checkbox"/> Z Tag										
7	<b>* Which brand of applicator was used to apply the approved indicator?</b> Type of applicator, if known _____ Colour of applicator _____										
8	Date of purchase, if known (YYYY/MM/DD)										
9	<b>* When were the indicators applied?</b> <input type="checkbox"/> Calving <input type="checkbox"/> Branding <input type="checkbox"/> Weaning Date applied (YYYY/MM/DD)										
10a	When was the indicator-related problem identified? <input type="checkbox"/> In pasture/feedlot <input type="checkbox"/> After shipping										
10b	<input type="checkbox"/> Is the animal's ear torn (indicator ripped out)? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> If the ear is not torn, is there just a hole left? <input type="checkbox"/> Yes <input type="checkbox"/> No										
11	<b>* Which approved indicator numbers were affected?</b>										





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**CCIA Staff Observations** *(Internal Use Only)*


**Investigative Outcomes** *(Internal Use Only)*

Item	Description and Notes	Follow-up	Investigative Outcomes Action-Required Date?
		<input type="checkbox"/> Yes <input type="checkbox"/> No	
		<input type="checkbox"/> Yes <input type="checkbox"/> No	
		<input type="checkbox"/> Yes <input type="checkbox"/> No	

**Follow-up Conducted** *(Internal Use Only)*

At site	<input type="checkbox"/> Yes <input type="checkbox"/> No	
By telephone	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Other	<input type="checkbox"/> Yes <input type="checkbox"/> No	

*\*Note: Will provide key information for evaluation*

Action approved by

Name \_\_\_\_\_

Date \_\_\_\_\_

Signature \_\_\_\_\_

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.