Texas Animal Health Commission

Exotic CWD Susceptible Species Mortality Record

PIN or LID County		nty	,			TAHC Region (if known) Latii			Longitude	Longitude	
Owner Name						1	Ranch Name				
Mailin	g Address						1				
Physical Location of Herd (911 address or description)											
Phone			Alternate Phone			Email					
No.	Date of Death	Species	Sex	Age	Any Animal	l IDs (RFID, N	UES, or (other)	Sample Collected? (Yes/No)	Collection Date (if sample collected)	Accession Number
1											
2											
3											
4											
5											
6											
7											
8											
9											
10											
Own	 Submit completed forms are due to the TAHC by April 1st of each year. Submit completed forms any of the following ways. By Email: CWD_reports@tahc.texas.gov By Fax: 512-719-0729 By Mail: TAHC, Attention: CWD Susceptible Species Reporting, P O Box 12966, Austin, TX 78711-2966 						v tible Species				

Exotic CWD Susceptible Species Mortality Record — Continuation

PIN or LID			County			TAHC Region (if known)	Latitude		Longitude		
No.	Date of Death	Specie	es Sex	Age	Any Animal	IDs (RFID, NUES, or	other)	Sample Collected? (Yes/No)	Collection Date (if sample collected)	Accession Number	
Completed forms are due to the TAHC by April 1 st of each year. Owner shall retain a copy of the completed form for one year. For further information contact 1-800-550-8242 x 777.					r one year.		Submi • •	it completed forms any of the following ways. By Email: CWD_reports@tahc.texas.gov By Fax: 512-719-0729 By Mail: TAHC, Attention: CWD Susceptible Species Reporting, P O Box 12966, Austin, TX 78711-2966			

Instructions — Exotic CWD Susceptible Species Mortality Record

This form was created to facilitate the recording of eligible Exotic CWD Susceptible Species mortalities as required by Texas Animal Health Commission (TAHC) rule (Title 4, Part 2, Chapter 40, Rule §40.5 of the Texas Administrative Code). To view the CWD rules, go to the Statutes & Rules page of the TAHC website and click on the <u>Texas</u> Administrative Code link.

Form Completion

- **PIN or LID:** Unique Premises Identification number received from the TAHC Central Office or a Region Office. Herd owners may call either office to obtain PIN or LID numbers.
- **County:** County where premises is located.
- Latitude/Longitude: Lat/Long coordinates should be obtained at the entrance to the premises where the animals are located. These coordinates should be recorded in decimal degrees format. If you are not able to obtain coordinate data for the premises, leave this blank.
- **Owner Name:** Name of owner or contact person such as ranch manager.
- **Ranch Name:** Name of facility where Exotic CWD Susceptible Species are located. If ranch name is the same as owner name, write the owner name in this block. Do Not Leave Blank.
- Mailing Address: Mailing address where the premises receives mail.
- **Physical Location of Herd (911 Address or description):** Physical location information in 911 address format (*example:* "123 FM 71") or in descriptive format (*example:* "On Hwy 71 3 miles south of intersection of Hwy 71 and US 290").
- **Phone:** Phone number of contact person.
- Alternate Phone: Additional phone number of contact person.
- Email: Electronic address of contact person.
- Mortality Data: This information is to be provided on or before April 1 of each year to TAHC.
 - Date of Death: All Exotic CWD Susceptible Species 16 months of age or older that dies or is harvested.
 - List the species: Any of the Exotic CWD Susceptible Species, elk, red deer, Sika deer, moose, and any subspecies and hybrids.
 - Gender: Enter male or female for each animal listed.
 - Age: List age of the Exotic CWD Susceptible Species.
 - Animal ID: Any identification on the Exotic CWD Susceptible Species such as RFID, NUES, or other.
 - **Sample Collected:** Enter Yes or No if a sample was collected. If yes, enter accession number and collection date.
- **Record Retention:** Must maintain mortality record for one year after submitting the form to the Commission.

Form Submission

This form may be completed and mailed to the address shown on the form; faxed to the number on the bottom of the form; or sent by email to CWD_reports@tahc.texas.gov.