According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The OMB control number for this information collection is 0579-0327. The time required to complete this information collection is estimated to average 15 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

OMB Approved 0579-0327 EXP: 08/2026

## UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE VETERINARY SERVICES

## MANUFACTURER APPLICATION FOR APPROVAL OF OFFICIAL ANIMAL IDENTIFICATION DEVICES

Submission of this form by a device manufacturer indicates that they agree to follow the procedures for approval of official animal identification methods and devices contained in the Animal Disease Traceability (ADT) General Standards document and submit all required supporting documentation (see ADT General Standards Part C. Approval of Official Identification Methods and Devices for Animals and the associated appendices, and 9 CFR 79.3(k) for sheep and goats). For more information on ADT and official identification devices visit the ADT Website at http://www.aphis.usda.gov/traceability/.

☐ Initial		Final		☐ Mod	lification of an approved device	
Please refer to the Animal Dise supporting appendices for infor				on C: Approval of Official I	dentification Methods and Devices, and	
3-77						
Name:			Premises Ide	Premises Identification Number (PIN):		
Street Address:						
Street Address 2:						
City:			State:	State: Postal Code:		
Phone:						
			Email:			
rimary Contact First Name:		Last Name:				
Phone:	Phone 2	2:	Email:			
Do you plan to be a device/tag	manager? (Distribute	. H	•			
Yes No	manager: (Distribut	e the approved device)				
Yes No		e tne approved device)				
Yes No	arding this device?		ng and/or Imprinting on	ly 🔲 U.S. Devic	e Manager only (foreign manufacturer)	
Yes No  What is the company's role reg  Complete manufacturi	arding this device? ng, imprinting, and e fication (RFID) only)	ncoding	ng and/or Imprinting on	ly 🔲 U.S. Devic	e Manager only (foreign manufacturer)	
Yes No What is the company's role reg Complete manufacturi (radio frequency identi What is the bi-weekly production	arding this device?  ng, imprinting, and e fication (RFID) only)  on capacity for this de	ncoding	ng and/or Imprinting on	ly U.S. Devic	e Manager only (foreign manufacturer)	
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Yes No What is the company's role reg Complete manufacturi (radio frequency identi What is the bi-weekly production	arding this device?  ng, imprinting, and e fication (RFID) only)  on capacity for this de	ncoding	ng and/or Imprinting on	ly 🔲 U.S. Devic	e Manager only (foreign manufacturer)	
Yes No  What is the company's role reg  Complete manufacturi (radio frequency identi  What is the bi-weekly production  What is the anticipated invento	arding this device?  ng, imprinting, and e fication (RFID) only)  on capacity for this de	ncoding		ly U.S. Devic	e Manager only (foreign manufacturer)	
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Yes No What is the company's role reg Complete manufacturi (radio frequency identi	arding this device?  ng, imprinting, and e fication (RFID) only)  on capacity for this de	ncoding			e Manager only (foreign manufacturer)	
Yes No What is the company's role reg Complete manufacturi (radio frequency identi What is the bi-weekly productio What is the anticipated invento Business Name: Street Address:	arding this device?  ng, imprinting, and e fication (RFID) only)  on capacity for this de	ncoding	Premises Ide	ntification Number (PIN):		
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Yes No What is the company's role reg Complete manufacturi (radio frequency identi What is the bi-weekly productio What is the anticipated invento Business Name: Street Address: Street Address 2: City:	arding this device?  ng, imprinting, and e fication (RFID) only)  on capacity for this de	ncoding	Premises Ide	ntification Number (PIN):		
Yes	arding this device?  ng, imprinting, and e fication (RFID) only)  on capacity for this de	ncoding	Premises Ide  State:	ntification Number (PIN):		
Yes No What is the company's role reg Complete manufacturi (radio frequency identi What is the bi-weekly productio What is the anticipated invento Business Name: Street Address:	arding this device?  ng, imprinting, and e fication (RFID) only)  on capacity for this de	ncoding	Premises Ide  State:  Email:	ntification Number (PIN):		

<b>DEVICE INFORMATION</b> (If requesting a modification to an existing approved identification device, complete the information below with the new device specifications.)						
Device Name:	Manufacturer Product Code:					
Required International Committee for Animal Recording (ICAR) Conformance and Per	formance certifications attached?  Yes No					
ICAR Product Code:	ICAR Approval Date:					
Device Format: Eartag Type:	Injectable Transponder					
Physical Characteristics: One Piece Two Piece						
Shape: Round Rectangle Strip	Other (describe):					
Primary Material:						
High resolution pictures and diagrams showing all aspects of the device including materials used in each component and measurements (including pictures of all print formats and colors for which approval is requested for sheep and goats tags)  Yes  No						
(USDA reserves the right to approve methods of identification specific to each species. Additio	CIES  nally, the use of injectable transponders in food animals is subject to FDA and FSIS regulations.  fficial identification method for bison and cattle.)					
Cattle/Bison Deer/Elk	Horses Sheep/Goats Swine					
DEVICE	DETAILS					
Low Frequency (LF) 134.2 kHz (must conform to ISO 11784 and 11785)						
Technology type: HDX FDX						
UHF						
Numbering Format: Animal Identification Number (AIN)	National Uniform Eartagging System (NUES)					
Dual (combined low and ultra-high) Frequency Eartag (AIN Numbering format or	nly)					
☐ Visual Only						
For technologies other than RFID, please contact ADT Program Staff at traceability@usda.gov.						
PERFORMANCE AND QUALITY CONTROLS						
I certify that the identification device submitted for approval meets all perforequirements as defined in the ADT General Standards.	rmance and conformance Yes No					
Description of the quality control measures detailing the ability to produce consistently and according to the specifications contained in the ADT Ger the full quality control plan and flow diagram for this identification device components, encoding and/or imprinting, shipment and addressing consumif more than one company is involved with the manufacturing of the device control plan is attached for the entity that performs each step and their local	neral Standards, including from manufacturing of all er complaints, is attached. components, a full quality					
If requesting approval for a sheep and goat identification device, a signed Approval to Produce Official Eartags for Sheep and Goats is attached.	Company Agreement for Yes No					
SIGNATURE						
Applicant Signature	Date					