Steve Troxler Commissioner



R. Doug Meckes State Veterinarian

North Carolina Department of Agriculture and Consumer Services Veterinary Division

# Farmed Cervid License Application

August 1, 2018

Thank you for your interest in joining the North Carolina Farmed Cervid program. All farmed cervid owners are required to have a license with the Department prior to obtaining cervid for their facility. This packet contains information, forms, and instructions on how to complete the application process to obtain your license from the Department. If you have any questions about the process or this application, please call our office at 919-707-3250 or email us at <u>farmedcervid@ncagr.gov</u>.

To obtain a North Carolina Farmed Cervid License, all cervid producers are required to complete and return the following documents:

## 1) The North Carolina Farmed Cervid Program Application

This is the application to complete to apply for a North Carolina farmed Cervid License. If approved for a license, you must complete an annual renewal application each year that you have cervid enrolled in the Farmed Cervid Program (renewals are sent in October for the following calendar year).

a. Chronic Wasting Disease (CWD) Herd Certification Program Statement of Enrollment

All farms with CWD susceptible cervids (e.g. include white-tail deer, elk, red deer, sika deer, Japanese deer, spotted deer, mule deer, Wapiti, Moose, or a hybrid of these species) will be enrolled in this federal program which is regulated by the state of North Carolina. See the enclosed handout for information of what CWD is and how you can protect your herd. This program provides a higher level of standards and meets the federal CWD Herd Certification Program standards. Your herd is required to be a fully certified if you plan to export animals out of state.

b. The Statement of Understanding - Guide for New Farmed Cervid Licensees

The statement of understanding gives applicants a quick overview of the highlighted areas of importance. It is highly recommended that each new licensee fully read all rules and regulations that apply to this program; these can be found at the Office of Administrative Hearing website for NC Administrative Code, and the Electronic Code of Federal Regulations website. If you have questions, contact our office at 919-707-3250.

2) The Premises Identification (ID) Registration Application

All cervid producers are required to have their premises registered with the North Carolina Department of Agriculture and Consumer Services. The Premises ID is linked to the property where cervid are kept. It provides information should an animal health emergency occur. Official identification for each cervid is required, and the official identification numbers are attached to each cervid and then associated with the Premises Identification number. The yellow handout is the Premises ID application.

When completed, return the application to:

N.C. Department of Agriculture & Consumer Services
Veterinary Division
Farmed Cervid Program
1030 Mail Service Center
Raleigh, NC 27699-1030

Please allow thirty (30) days for processing of all forms, after which our staff will contact you regarding your application and to set an appointment with you to conduct a site visit.

Once you have obtained your license and have received cervid at your facility, all producers are required to submit their animals for CWD testing upon death. The cervid head (or whole carcass) should be shipped according to approved procedures. Tissue samples may be collected from cervids after death by a licensed and accredited veterinarian, a Certified CWD Collector, or the head and or carcass may be submitted to any of the North Carolina laboratories (see attached map).

Also included in this packet are the following documents for your reference.

- 3) Lab Submission Guidelines
- 4) Request for Additional Tags
- 5) Statement of Receiving Cervid
- 6) Movement Permit Application
- 7) Example of an Approved Movement Permit
- 8) NC Diagnostic Lab Contact Information
- 9) Chronic Wasting Disease Overview

Thank you again for your interest in the North Carolina Farmed Cervid Program.

Sincerely,

Mon T. Mayos

Michael L. Mayes Farmed Cervid Program Manager North Carolina Department of Agriculture & Consumer Services Veterinary Division

# North Carolina Farmed Cervid License Application

Applicant Information	
Name:	County:
Address:	
City:, NC, Zip	
Primary Phone#:	Alt Phone #:
Email:	
Species of Cervid planning to acquire: (e.g. whitetail, fa	
Purpose of becoming a cervid producer: (e.g. antler/parts	s production, cervid sales, meat production, etc.)
Farm Information where animals will be located (if d	lifferent than above)
Name:	County:
Address (no PO boxes):	
City:, NC, Zip	
Primary Phone#:	Alt Phone #:
Farm Manager or Designee	
Name:	
Primary Phone#:	Alt Phone #:
Email:	
Release of I	nformation
Select if you desire to have your information released. Of website for public distribution and can be released to oth name, address, and phone number. The purpose of this is amongst the industry. If you chose not to release your in will be held confidentially.	ners who ask for this information. This will include s to facilitate cooperation and commercial operations formation, it will not be published on the website and

# Herd Certification Program Enrollment

By submitting this application, your herd will be enrolled in and abide by the requirements of the Herd Certification Program (HCP) for susceptible species and or the NC Monitored Herd Program for non-susceptible species. If you have both susceptible and non-susceptible cervids then you will be enrolled in the Herd Certification Program. Refer to 02 NCAC 52L for specific rules and requirements of the program.

# **Statement of Understanding**

Guide for New Farmed Cervid Licensees

I,	have read the Guide for New Farmed Cervid Licensees
dated August 2018 and understand the requirements to	o become a farmed cervid license holder.

Date:\_\_\_\_\_

# Accuracy of information submitted:

I hereby attest to the accuracy of the information in this application and request to become a Farmed Cervid License holder within the state of North Carolina. I understand the process may take thirty (30) days to be completed and I will be contacted by a representative of the Department to finalize the licensing process.

Applicant's Signature:	Date Signed:
	(For Internal Use Only)
Date Office Received:	Inspection Date Scheduled:
Signature:	Print Name:
Date Signed:	





North Carolina Department of Agriculture & Consumer Services

NCDA&CS Veterinary Division: Premises Registration Form – Website

Premises Owner Account Information:	Cattle/Sw Check: 🗍 ID Ta	<sub>vine</sub> ∕Cervid lgs            Tattoo
Business/Farm Name:		
Primary Contact:	(Middle Name)	(Last Name)
Secondary Contact: (Optional) (First Name)	(Middle Name)	(Last Name)
Mailing Address:		
City: State:	Zip:	County:
Phone Number:	ext: Business	☐Home ☐Cell ☐Fax ☐Pager
Phone Number:	ext: Business	☐Home ☐Cell ☐Fax ☐Pager
Email:		(*For notification purposes only)
Business Type: Individual Partnership	Incorporated LLC LLP Go	vernment Entity INon-profit Organization
Premises Information: (Primary location where livestock reside-if animals are	a managed on senarate locations, apply	for multiple premises ID's
Premises Type: Production Unit / Farm / Ranc		Exhibition Clinic Laboratory
Non-Producer Participant (ie:	DHIA, non-animal prem., etc.) 🗌 Slaug	ghter Plant Other:
Premises Name:		(example: heifer place, farm #1, headquarters)
Address Information: Check box if same as mailing	address 🗌 (Do not check if mailing	address is a PO Box or Route and Box Number)
Premises Address:		
City: State:	Zip:	County:
GPS Coordinates at entrance: Latitude N		
Species Information: ** PLEASE FILL	IN QUANTITY (how many ar	nimals do you have) per species**
(Check all that apply. Quantities of animals are only reported other statutes can be viewed at <u>www.ncleg.net</u> . Please see		is protected by General Statute 106-24.1. This and all
Cattle: Beef Dairy Bison Qty: Goats	s: ⊡Meat ⊡Dairy ⊡Fiber Qty:	Sheep:  Meat  Dairy  Fiber  try:
Equine: Horse Donkey Mule Qty:	Camelids: 🗌 Alpaca 🔲 Llama	Qty: Cervids: Qty:
Aquaculture:	Other Species:	Qty:
Poultry: Chicken Turkey Ratite (ostrich and/ (If you grow poultry on contract for a corporation, ple	/or emu) Oty: □Wate ease indicate production system and co	rfowl/Game bird □Other Qty: rporation for which you grow.)
Poultry Production System: Broilers La	yers Breeders Commercial Te	oms Commercial Hens
Integrator/Corporation:		
Swine: Breeding Feeding Nursery Qty	Other Qty:	
(If you grow swine on contract for a corporation, plea	ase indicate production system and corp	poration for which you grow.)
Swine Production System: Sow Nursery		
	Finisher Sow-Nursery Sov	
Swine Production System: Sow Nursery Integrator/Corporation: Producer/Contact Signature:	Finisher Sow-Nursery Sov	w-Finisher Isolation Unit Al/Boar Stud



# Guide for New Farmed Cervid Licensees

Updated August 2018

The information below is an extracted from the USDA Chronic Wasting Disease Program Standards, North Carolina Administrative Code (NCAC), and Code of Federal Regulations. Although the most pertinent information has been compiled in this document, it is vital to take the time to read and become familiar with the all rules and regulations.

#### **Inspections**

(2.7) of Program Standards

Inspections are conducted annually and physical inventories are conducted at least every 3 years. During physical inspections, all individuals must be visually inspected and identification must be clearly read and matched to herd records. Annual herd and premises inspections include record inventories. Herds may not advance in the Herd Certification Program until the annual inspections have been completed, submitted, reconciled, and approved.

## Records

#### (3.3) of Program Standards

Each owner must maintain a current complete herd inventory which must include, at minimum, the following records for each animal:

- 1. All identification (tags, tattoos, electronic implants, etc.)
- 2. Age
- 3. Sex
- 5. Date of acquisition and source of each animal(s) that was not born into the herd (owner name, city, state)
- 6. Date of removal and destination of any animal(s) removed from the herd (owner name, city, state)
- 7. Birth date
- 8. Date of death (and cause, if known) for animals dying within the herd
- 9. Date of CWD sample submission, submitter, owner, premises, and animal information, and official CWD test results from NVSL or approved laboratory

## Fencing

(4) of Program Standards

All fences must be a minimum of 8 feet and maintained such that they prevent ingress or egress of cervids. Fences must be structurally sound, maintained in good repair, and of sufficient construction to contain the animals.

## **Reporting Escapes, Disappearances, and Deaths**

#### (2.4) of Program Standards

All escapes, disappearances, and deaths must be reported immediately upon discovery. Ingress of wild cervids must also be immediately reported. Herd owners should work to recapture animals and work with the Commission on decisions about appropriate disposition of the animal(s).

## **Animal Identification**

(3.2) of Program Standards

All animals must be tagged according to 9 CFR 55.25 which mandates two animal identifications for each individual. The Department requires the use of official button and bangle ear tags. Natural additions to herds must be tagged before 12 months of age or before they are moved, and all animals to be moved must be tagged.

## **Sample Collection**

#### (5.6) of Program Standards

Good quality sampling and complete tissue collection of obex and medial retropharyngeal lymph nodes (MRPLN) from dead animals are essential for successful CWD surveillance. It is the licensee's responsibility to ensure good quality tissue samples are collected and all required samples are submitted. Failure to comply with this provision may result in loss of Herd Certification Program status, among other actions. Samples may not be collected by the herd owner unless they are approved by the Department as a certified or designated CWD sample collector. Licensees may remove and submit the entire head for testing with all attached identification to a NCDA&CS laboratory.

If an animal dies on a weekend or holiday or when the lab is closed for any reason, the licensee must make accommodations to protect the head of the animal. It is recommended that the head be chilled (NOT FROZEN) and sent to the nearest approved lab in North Carolina at the next available date. It is also required to notify the department of the death of any cervid.

## Sample Quality: Control and Consequences

#### (5.9 & 5.10) of Program Standards

Approved State Officials or APHIS employees have the authority to adjust herd status if incomplete or poor quality samples are repeatedly submitted for testing. Poor quality samples include samples that are severely autolyzed, samples from the wrong portion of the brain, the wrong tissue, or samples that are not testable for other reasons.

Failure to test for CWD of any animal 12 months or older that dies, is slaughtered, escapes (and recaptured), or is lost resulting in missing samples, or submission of incomplete or poor quality samples, may be cause for delayed advancement, loss of or reduction in status, cancellation from the program as determined by APHIS or and approved North Carolina official, or a warning letter, civil penalty, or loss of license.

## Importation

02 NCAC 52B .0213

No farmed cervid can be imported into North Carolina that is susceptible to Chronic Wasting Disease; this includes whitetail deer, elk, red deer, sika deer, Japanese deer, spotted deer, mule deer, Wapiti, Moose, or a hybrid of these species. For applications requesting importation of allowable cervid, the following requirements must be met.

1. The following statement must also appear on the health certificate: "All cervidae on this certificate originate from a Chronic Wasting Disease (CWD) monitored or certified herd in which these animals have been kept for at least one year or were natural additions. There has been no diagnosis, signs, or epidemiological evidence of CWD in this herd or any herd contributing to this herd for the previous five years."

2. Proof of a negative single cervical test for tuberculosis accredited or qualified herd. If the animal is six months of age or older and originates from a herd of unknown status, two negative single cervical tests for tuberculosis will be required with the second being greater than 90 days from the initial test and within 60 days prior to arrival. If the animal is less than six months of age and from a herd of unknown status, one negative single cervical test will be required. The herd of origin and commingled susceptible species must have had no diagnosis of tuberculosis in the 36 months preceding shipment.

## Movement

#### (8) of Program Standards

Requirements for movement of live cervids <u>interstate</u> are described in 9 CFR 81.3 and 02 NCAC 52L .0113. The requirements for issuing certificates for movement are in 9 CFR 81.4. Most notably, animals must be from Certified Herds, cannot be experiencing any clinical signs of CWD, must be tagged, and must be accompanied with a Certificate of Veterinary Inspection (CVI). The consignor or Licensee should contact the State official in the State of destination to determine if there are any additional requirements.

Requirements for movement of live cervids <u>intrastate</u> are described in 02 NCAC 52L .0113. The process for obtaining a movement permit include submission of a movement permit application, processing of application, and receiving approved application and movement permit. A movement permit application must include the applicant's name, license number, species and sex of each animal, identification of each animal, destination and reason for movement. For more information, please contact us at 919-707-3250 or farmedcervid@ncagr.gov.

# **Certificate of Veterinary Inspection (CVI)**

(8.2) of Program Standards

The CVI issued for movement must contain the following information:

- 1. Identification numbers of each animal in the shipment
- 2. Total number of animals being moved in the shipment
- 3. Purpose of animal movement
- 4. Consignor and herd of origin with complete address
- 5. Consignee and point of destination with complete address
- 6. CWD HCP herd program status of the animals in the shipment
- 7. A statement by the issuing accredited veterinarian or State or Federal veterinarian that the animals have achieved Certified status in the CWD HCP and that the animals were not exhibiting clinical signs associated with CWD at the time of examination.

#### Lab Test Submission Guidelines

Lab Submission Guidelines

It is required to test all cervid that expire on your property for CWD in accordance with North Carolina Administrative Code. Please follow these guidelines when submitting a sample to the lab.

- 1. All animals that are 12 months or older must be submitted to a state approved lab (see attached list) for CWD testing and all deaths must be reported to the Veterinary Division within 24 hours upon discovery of death. If the death is discovered on a weekend, holiday or any other date the lab is closed, care must be taken to preserve the animal to ensure quality tissue(s) can be sampled.
  - a. Animals should not be frozen as this can destroy the tissue needed for sampling. Animals should be chilled and stored until they can be sent to the lab for testing on the next date the lab is open.
  - b. If the whole animal is not being submitted for testing, care must be taken when removing the head to ensure that damage is not done to the brainstem (obex) and lymph nodes that will be tested.
    - i. Remove the head well below the adam's apple (laryngeal cartilage) of the cervid to ensure the testable areas are not impacted. See photo below.
  - c. Tissue samples may be collected from cervids after death if you are a licensed and accredited veterinarian or a Certified CWD Collector.
  - d. Do not remove tags
- 2. A lab submission form is required to be completed when submitting the animal to the lab.
  - a. The general lab submission form can be found at: <u>https://www.ncagr.gov/vet/ncvdl/VetLabSubmissionForms.html</u>
  - b. Copies of the general lab submission form must be sent to the Veterinary Division once filled out so that inventory records can be updated.



#### North Carolina Department of Agriculture and Consumer Services Farmed Cervid Tag Application – Request for Additional Tags

Licensee Name:	License No.:
Address:	County:
City, State, Zip:	Phone:

Species	Sex	Birth Year
1.		
2. 3.		
3.		
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25.		

Species	Sex	Birth Year
1.		
2.		
3.		
4.		
5.		
6.		
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10.		
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25.		

Species Key: WT=white-tailed deer; FD=fallow deer; AX=axis deer; SK=sika deer; EK=elk/red deer; CR=caribou; RD=reindeer

Comments:\_\_\_

I hereby submit this report in accordance with Article 49H chapter 106-549.97 of the NC General Statutes and certify the information contained herein to be correct.

Licensee/Agent

Date

\_\_\_\_\_

Return Completed Report to:

North Carolina Department of Agriculture & Consumer Services Farmed Cervid Program 1030 Mail Service Center Raleigh, NC27699-1030

# **Receiving Cervids**

In order to maintain integrity of the program, it is recommended you receive cervids from other farmed cervid producers within North Carolina. This can be accomplished (after your facility has been approved and licensed), by obtaining a movement permit from the Department if all requirements are met. See example on next page of a movement permit application and an approved permit

If you are receiving CWD susceptible animals, then you must receive them from a CWD certified herd within North Carolina. Cervids that are susceptible to CWD are prohibited for importation into NC.

You may obtain non-susceptible cervidae from another state if all requirements are met.

Prior to receiving any cervidae, please contact the department to ensure you are in compliance with all rules and regulations.

# North Carolina Department of Agriculture & Consumer Services FARMED CERVID MOVEMENT PERMIT <u>APPLICATION</u>

Part I	I APPLICANT INFORMATION / ORIGIN				
Licensee Name:	Licensee Name:				
Address:			County:		
City, State, Zip:			Phone Numb	er:	
Facility Site Location	1: <u> </u>				
County:					
PART II NOTE: You must a	ttach a letter o	Destina f authorization or in		e state of destination. Check one:	
Movement is within	North Carolin	na 🗌 Movemen	t is out of North Carolina		
Name/Organization:			County:		
Address:			Phone Numb	er:	
City, State, Zip:			Date(s) of Tr	ansport:	
Import Permit Numb	er (from other s	tate, if applicable): _			
PART III		Cervii	DINFORMATION		
SPECIES	S SEX	BIRTH YEAR	BANGLE TAG NO.	BUTTON TAG NO.	

I hereby submit this report in accordance with the requirements of 02 NCAC 52L and certify the information contained herein to be correct to the best of my knowledge. I also understand this is an application and not the actual permit. The permit will be sent upon approval.

Licensee/Designee	Signature
-------------------	-----------

Date

Return application to:	N.C. Department of Agriculture & Consur Farmed Cervid Program 1030 Mail Service Center Raleigh, NC 27699-1030	ner Services	
Department Use Only	y:		
Approved / Disappro	oved		
Name / Signature		Date	

Farmed Cervid Transportation Permit           North Carolina Department of Agriculture & Consumer Services           Farmed Cervid Program           1030 Mail Service Center           Raleigh, NC 27699-1030				<u>NC S513</u> <u>STATUTES</u>	<u>NC 8513</u>				
Tele: (919) FAX: (919)								RULES 02 NCAC 521	
PERMITTEE/I								PERMIT NUMBE	
	John P. Doe 123 Anystreet Boston, NC 27699				EFFECTIVE 11/1/2015	EXPIRES 11/30/2015			
					Phone: 12.	3-122-	1212	COUNTY Deere	
In accord transporta <b>Originat</b> i	CONDITIONS AND AUTHORIZATIONS:         In accordance with the above listed rules and statutes, this permit authorizes the above individual for the transportation of the following animal(s) at the address and date(s) indicated:         Origination:       123 Anystreet Boston, NC 27699         Destination:       Hi Ho Farms 321 Always Road, Crossbow, NC 27777								
Transpol Species	rtation Sex	of: Birth	840#	Bangle /	Species	Sex	Birth	840#	Bangel /
		Year		Button Tag No.			Year		Button Tag No.
WT	Μ	2015	840001003203300	3300					
WT	Μ	2015	840001003203301	3301					
WT WT	M	2015	840001003203302	3302					
	Μ	2015	840001003203303	3303					
ISSUED BY:					TITLE: Permit	ts Supe	ervisor		date: 11/10/2015

# NC Veterinary Diagnostic Laboratory System



Elkin Laboratory 1689 N. Bridge Street Elkin, NC 28621 Phone: (336)526-2499: Fax: (336)526-2603

Rollins Laboratory ★ 2101 Blue Ridge Road Raleigh, NC 27607 Phone: (919)733-3986; Fax: (919)733-0454

Arden Laboratory 785 Airport Road Fletcher, NC 28732 Phone: (828)684-8188; Fax: (828)687-3574

Griffin Laboratory 401 Quarry Road Monroe, NC 28112 Phone: (704)286-6448; Fax: (704)283-9660

# Chronic Wasting Disease (CWD) Overview

#### In Fenner's Veterinary Virology (Fifth Edition), 2017

Chronic Wasting Disease of Deer and Elk

Chronic wasting disease is a progressive, fatal neurological disease of captive and/or free-ranging mule deer (*Odocoileus hemionus*), mule deer hybrids, black-tailed deer, white-tailed deer (*Odocoileus virginianus*), Rocky Mountain elk (*Cervus canadensis*), and Shira's moose (*Alces alces*) in North America. In 2016 chronic wasting disease was for the first time detected in Europe (Norway) in free-ranging reindeer and moose. Chronic wasting disease was first recognized in captive mule deer in 1980 in Colorado; summaries of harvest survey data pertaining to occurrence of the disease published in 2009 varied from 1–14.3% among mule deer, to 1–2.4% among elk, and to 1% among moose. The prevalence of chronic wasting disease in captive deer can reach 90% in specific herds. The disease has since been recognized in extensive portions of North America, including 19 states of the United States and extending from Utah to New York and two Canadian provinces (Fig. 31.4). In recent years, the disease has also been found in wild animals that seemingly have lived for many generations far from captive deer and elk facilities, although these infections may have originated from illegal importation of infected animals from states with endemic chronic wasting disease.

Chronic wasting disease is characterized by abnormal behavior, teeth grinding, polyuria, and polydipsia, and marked loss of weight. Death usually occurs within a few months of the appearance of clinical signs. Histologic lesions include widespread spongiform change of the brain—ie, neuronal vacuolation—as well as astrocytic hypertrophy and hyperplasia and microgliosis. Chronic wasting disease-infected cervids harbor prion aggregates in many extracerebral organs, including pancreas, adrenal gland, peripheral nerves, muscle, and in lymphoid tissues throughout the body. Lymph nodes, tonsils, and Peyer's patches contain prions within 3 months post-oral exposure, and prions can be detected in the dorsal motor nucleus of the vagus nerve by 6 months.

The precise mechanism of prion spread among deer and elk is unclear, however recent studies confirm that infection can be transmitted to naive deer with the feces, saliva and urine from prion-infected deer. Prions can also be transmitted by blood transfusion, and a study in Muntjac deer (genus *Muntiacus*) showed vertical transmission of prion infection.