



Legacy Verified SAV Feedyard Application

APPLICATION INSTRUCTIONS:

This Application covers SAV Feedyard Programs requirements. Please fill out Sections 1-6. These sections are required for all programs and with the Signature Page (Section 8), completes the Application for Source and Age.

Please complete Section 7 if you would like to verify home raised calves.

Section 8 is the Signature Page and **MUST** be signed for your Application to be complete.

If you have any questions about this application or any of the legacy Verified Programs, please feel free to call the Legacy Verified Office.

Legacy Verified, LLC
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Elizabeth, CO 80107
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Section 1: GENERAL INFORMATION

1.1 Contact Information:

Feedyard Name:	Date of Application:
Primary Contact Name:	Primary Contact Best Phone:
Feedyard Mailing Address:	Feedyard Shipping Address:
Primary Contact Best Email Address:	Date Approval is Needed By/One-Time Full Capacity:

1.2 Additional Feedyard/Ranch Locations: (Please add additional ranch locations if you are verifying home raised calves.)

Please list and identify additional Feedyard/Ranch locations: (In addition to Feedyard Head Quarters.)

Feedyard/Ranch/Pasture Name	Location (City and State)	Miles from Feedyard HQ

1.3 Does the feedyard want to enroll home raised calves in addition to the feedyard?

- Yes – Please Complete Section 7
- No

Section 2: EMPLOYEE TRAINING

2.1 Employees and Responsibilities:

Employee Name(s)	Duties: (Calving, Identification, Feeding, Doctoring, Shipping, Records, Etc or "All")

Please use an Additional Sheet if Necessary

Section 3: RECORD KEEPING

3.1 Does the Feedyard have a records system in place to keep track of cattle sources, receiving, processing feeding, doctoring, shipping, etc?

- Yes
- No

3.2 Please briefly describe record-keeping system (Lot Files, Health, Shipping, Etc):

3.2 Does the Feedyard keep records for at least 3 years?

- Yes
- No

3.3 Are records kept in a secure location that prevents loss, damage, or alteration?

- Yes
- No

Section 4: RECEIVING & PROCESSING

4.1 Does the Feedyard start a Lot File at the time of receiving?

- Yes
- No

4.2 If the answer to 4.1 was “No”, how does the Company/FY keep track of ranch sources and lot information?

4.3 Please describe the Feedyard’s Basic Receiving Procedures:

4.4 Are cattle processed in-house or is a contract processing crew utilized?

Section 5: CATTLE MOVEMENTS

5.1 Are movements between pens (and pastures) documented?

- Yes
- No

5.2 Are cattle ever moved out of the feedyard and put on pasture (ie” wheat pasture)?

- Yes
- No

5.3 If you answered “yes” to 5.1, please describe how movements are recorded:

- N/A

Section 6: SHIPPING

6.1 Please describe the feedyard’s process for shipping:

Section 7: HOME RAISED CALVES

- N/A

7.1 How many home raised calves is the Feedyard planning to put into the Legacy Verified Program(s)? _____

7.2 Does the Feedyard/Ranch Record Individual Calving birthdates or just First and Last Calf Born?

7.3 Calving Information: (Operations with multiple calving seasons must identify each group differently.)

Calving Date Range (Ex: 1/1/18 – 3/1/18)	Number of Calves in Calving Group (Season)	Identification: (Tag Descriptions, Brands, Notches ie: Green Panel Tag LE; Open A LH)

7.4 Have the home raised calves ever moved off of the ranch (No longer under Company/FY Management)?

- Yes – Please Describe Circumstance:**

- No**

7.5 Does the Company/FY have any purchased calves onsite? (Consider the ranch and feedyard locations.)

- Yes – Please List ALL Types (Pairs, Stockers, Finishers, Grafted Calves, etc):**

- No**

7.6 If you answered “yes” to the above question, how does the Company/Ranch identify (and segregate if applicable) purchased cattle to make sure these animals are not marketed/sold as program animals?

- N/A**

7.8 When will you apply the Program Compliant Tags? (Calving, Branding, Pre-Conditioning, etc.)

- N/A – SAV Cattle Move Directly to an APPROVED location and/or they are Verified for Saudi Arabia (and no other Programs).**

7.9 How do you plan to market your cattle?

Section 8: SIGNATURE

By signing this Application, you are confirming that all of the information on this document is true and correct to the best of your knowledge and you are consenting to the scheduling of an audit to verify that the requirements to the program have been met.

Signature of Responsible Party

Date Signed

Printed Name of Responsible Party

Referred By: _____

Promo Code: _____

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