FORM APPROVED OMB NO.: 0579-0065

(OMB statement on reverse)

U.S. DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE VETERINARY SERVICES

| STATE OF: | REPORTING PERIOD | | | |
|-----------|------------------|-----|--|--|
| | FROM: | TO: | | |

| CIVINE | | DROTECTION | IDDOCDAM | INSPECTION | CHMMADV |
|--------|--------|------------|-----------|-------------------|---------|
| SWIINE | пеагіп | PRUIECIIO | N PROGRAM | INSPECTION | SUMMART |

|)/M: | YEAR: |
|------|-------|

| SWINE HEALTH FROTECTION FROGRAM | WI INSTITUTION | IN SOMMAN I | | Q/WII | 1 - 2 / 11 (1) |
|---|-----------------------|----------------------|------------|-----------------|-------------------|
| SECTION I - GENERAL | | | | - | |
| 1. State authority for feeding food waste or garbage to s | wine | Allowed | Prohibited | | |
| 2. Enforcement responsibility for Swine Health Protection | n Act or equivalen | t State requirement | ts S | State Federal | Cooperative |
| 3. License is issued by State Federal | Both | Not Applicable (N/ | A) | | |
| SECTION II - SEARCHES DURING THIS RE | PORTING PE | RIOD | | State Personnel | Federal Personnel |
| 4. Number of searches made for nonlicensed garbage fe | eeders | | | | |
| 5. Number of nonlicensed garbage feeders found | | | | | |
| Number of nonlicensed garbage feeders found and lic Government agency enforcement action | ensed, or otherwi | se resolved, without | t | | |
| SECTION III - INSPECTIONS DURING THIS REPORTING PERIOD | | | | State Personnel | Federal Personnel |
| 7. a. Number of routine inspections of licensed premise | es . | | | | |
| b. Number of reinspections made of licensed premise | es | | | | |
| 8. Number of licensed premises inspected | | | | | |
| 9. a. Number of temperature checks on direct fire cooke | ers | | | | |
| b. Number of temperature checks on steam injection | cookers | | | | |
| 10. Number of prelicensing inspections completed | | | | | |
| 11. Number of inspections reporting abnormal occurrence | e of disease | | | | |
| 12. Number of inspections that initiated a FAD investigat | ion | | | | |
| | | | | State License | Federal License |
| 13. Number of licenses issued | | | | | |
| 14. Total number of licensed premises this reporting peri | iod | | | | |
| SECTION IV - VIOLATIONS DURING THIS F | REPORTING P | PERIOD | | State License | Federal License |
| 15. Number of licensed premises inspected and alleged Protection Act or equivalent State requirements | to be in violation of | of the Swine Health | | | |
| Number of licensed inspected premises alleged to be actions from a Government enforcement agency | e in violation that v | were corrected with | out | | |
| | | | | State Agency | Federal Agency |
| Number of licensed premises alleged to be in viol a Government enforcement agency for action | ation and not corr | ected that were forv | warded to | | |
| b. Number of licensed premises alleged violation cases handled by a Government enforcement agency this period | | | ement | | |
| c. Number of licensed premises alleged violation cases resolved | | | | | |
| 18. a. Number of nonlicensed feeders alleged to be in violation that were forwarded to a Government enforcement agency for action | | | ernment | | |
| Number of nonlicensed premises alleged violation period | n cases handled b | y a Government ag | ency this | | |
| c. Number of nonlicensed premises alleged violation | n cases resolved | | | | |
| 19. Name of AVIC or Area EPI | 20. Date | 21. Name of Stat | e Official | | 22. Date |
| VS FORM 13-2 (JAN 2004) | Previous | edition obsolete | | | |

| SECTION V - UNRESOLVED CASES (From items 17 and 18.) | | | | |
|--|---|--|--|----------------------------------|
| 23. a. NAME OF ALLEGED VIOLATOR(S) | b. TYPE (Licensed or Nonlicensed) | c. DATE OF THE ALLEGED VIOLATION | d. DATE SENT TO ENFORCEMENT AGENCY | e. FEDERAL OR STATE AGENCY |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| SECTION VI - NARRATIVE (Use for additional information | on or explana | tions.) | | |

24. EXPLAIN:

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0579-0065. The time required to complete this information collection is estimated to average 1 hour per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing the reviewing the collection of information.