number. average	The valid 2 hours pe	Apperwork Reduction Act of 1995, no persons are required to respond to a colle OMB control number for this information collection is 0579 0101. The time r r response, including the time for reviewing instructions, searching existing d iewing the collection of information.	equired to complete this	information collectio	n is estimated to	FORM APPROVED OMB NO. 0579-0101	
UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE VETERINARY SERVICES			Flock Inspection and Epidemiology Report Initial Flock Inspection for Complete Monitored Status in the Scrapie Flock Certification Program				
Flock ID		Flock Name and Address	Flock Location if Different				
Telephor	1e						
Inspector			Inspector ID		County		
Inspection Date			Latitude		Longitude		
Type of Flock Purebred Commercial Feeder Feeder			SHEEP	INVEN Adult Adult F Veating	GOATS		
Veterinar	y Practitior	er		Yearling Males Yearling Females Female Lambs/Kids Male/Lambs/Kids Castrated Males			
Species Predominant Breed		Predominant Breed			ed Males		
		CHECKLIST					
YES	NO	Sheep and goats inspected and found free of clinical signs of scrapie?					
YES	NO	Sheep and goats inspected and those over 1 year of age are officially iden	d goats inspected and those over 1 year of age are officially identified? I procedure for reporting of scrapie suspect animals and the submission of samples?				
YES	NO	Discussed procedure for reporting of scrapie suspect animals and the sub-					
		Written or computer records reviewed and contain the flollowing information?					
YES	NO	Official and Secondary Identification Type of official ID					
V/FO	NO	0					

YES	NO	Official and Secondary Identification Type of official ID			
YES	NO	Sex			
YES	NO	Breed			
YES	NO	Copy of Flock Inventory Attached			
		Does the producer understand the following records will need to be kept in the future?			
YES	NO	Date of Birth for future natural additions to the flock			
YES	NO	Site and Dams official and secondary identification for future natural additions			
YES	NO	Progeny Official and secondary identification and Sex			
YES	NO	Flock of Origin (Including SFCP status) and date of acquisition for purchased a nimals			
YES	NO	Animal deaths-date died and cause of death			
YES	NO	Purpose, reason, date and buyer name and address for animals which are sold			
YES	NO	Records of <one and="" animals="" applied="" as="" breeding="" id="" official="" old="" sheep="" sold="" year="">.</one>			
		Does the owner anticipate any of the following activities to occur over the next year, If so discuss the implications of the activities on their flock status			
YES	NO	Commingling of sheep with another producers sheep.			
YES	NO	Purchase of ewes from another producer?			
YES	NO	Purchase of rams from another producer?			
YES	NO	Use of semen and embryos.			

Comments

Flock Owner Signature		
	YES NO	Application Form Completed (VS Form 5-22)
Inspector Signature	YES NO	Received Copy of SFCP Standards
	YES NO	Meets Program Standards