

Animal and Plant Health Inspection Service

Veterinary Services

## National Animal Health Monitoring System

2150 Centre Ave Bldg B Fort Collins, CO 80526

Form Approved OMB Number 0579-xxxx Expires

## URBAN CHICKEN PREVALENCE RECORD

1. Please indicate your level of agreement with each of the following statements:

|    |  |   | Strongly<br>Agree | Agree | Slightly<br>Agree | Slightly<br>Disagree | Disagree         | Strongly<br>Disagree |
|----|--|---|-------------------|-------|-------------------|----------------------|------------------|----------------------|
|    | a.   | I would be in favor<br>of a law in my community<br>that allows ownership of<br>chickens in urban areas. | 1                 | 2     | 3                 | 4                    | 5                | 6                    |
|    | b.   | l would not mind if my neighbor owned chickens  | 6. <sub>1</sub>   | 2     | 3                 | 4                    | 5                | 6                    |
|    | C.   | Eggs from pet chickens<br>are better for you than<br>eggs purchased at a<br>grocery store.              | 1                 | 2     | 3                 | 4                    | 5                | 6                    |
|    | d.   | Chickens in urban areas<br>are a health hazard for<br>humans.   | 1                 | 2     | 3                 | 4                    | 5                | 6                    |
| 2. | Do   | you own any chickens?   |                   |       |                   |                      | D <sub>1</sub> ` | Yes □₃No             |
|    | If YES, do you purchase chicken feed at a local feed/tack/pet store? |   |                   |       |                   | D <sub>1</sub> `     | Yes □₃No         |                      |
|    | If NO, do you plan to own any chickens in the next 5 years?          |   |                   |       |                   |                      | D <sub>1</sub> ` | Yes □₃No             |

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to resond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0579-XXXX. The time required to complete this information collection is estimated to average 0.045 hours per response, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collected.