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| **UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE****NATIONAL POULTRY IMPORVEMENT PLAN** **FLOCK INSPECTION AND CHECK-TESTING REPORT** | 1. CLASSIFICATION |
| 2. FLOCK OWNER *(Name and address)* | 3. SUPPLY FLOCK FOR *(Name and address of l1atcllery or dealer)* |
| 4. SELECTED BY | 5. TESTED BY | 6. BREED, STOCK OR TRADE NAME |
| MALE | FEMALE |
| 7. NO. BIRDS IN FLOCK *(Males)* | *(Females)* | 8. HAS REPLACEMENT STOCK BEEN  PURCHASED [ ]  YES [ ]  NO | IF YES, GIVE SOURCE |
|  | SAT. | UNSAT |  | SAT. | UNSAT | EGG HANDLING *(Cont'd)* | SAT. | UNSAT |
| Flock separated from other fowl |  |  | Surrounding area kept clean |  |  | Dirty eggs kept separate |  |  |
| Other fowl tested |  |  | Animal kept out of poultry area |  |  | Cleanliness of hatching eggs |  |  |
| Reactors and cults removed |  |  | Limited access by visitors |  |  | Egg grading |  |  |
| Health of flock |  |  |  |  |  | Egg room temperature |  |  |
| Condition of litter |  |  |  |  |  | Egg room humidity |  |  |
| Location of equipment |  |  | EGG HANDLING | Egg room sanitation |  |  |
| Condition of equipment |  |  | Condition of nests |  |  |  |  |  |
| Windows screened |  |  | Condition of containers |  |  |  |  |  |
| Rodent control |  |  | Frequency of collecting |  |  |  |  |  |
| 9. NO.BIRDS CHECK  TESTED | NO. REACTORS | 10. RESULTS OF INSPECTION AND CHECK-TESTING |
| 11. REMARKS |
| 12. SIGNATURE OF STATE INSPECTOR | DATE |

VS FORM 9-8 Previous edition may be used

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