

U.S. DEPARTMENT OF AGRICULTURE  
GRAIN INSPECTION, PACKERS AND  
STOCKYARDS ADMINISTRATION  
PACKERS AND STOCKYARDS PROGRAM

## LIVE POULTRY DEALER INQUIRY

### Section 1 - General Information

1. Name and Address	2. Type of Organization <input type="checkbox"/> Association <input type="checkbox"/> L.L.C. <input type="checkbox"/> Corporation <input type="checkbox"/> L.L.P. <input type="checkbox"/> Individual <input type="checkbox"/> Partnership <input type="checkbox"/> Other _____ <span style="display: block; text-align: right; font-size: small;">(Specify)</span>
3a. Telephone No.	5. State Formed: _____
3b. Fax No.	Date Formed: _____
3c. Cell Phone No.	6. If firm operates on a fiscal year, list fiscal year:  From: _____
4. E-mail Address	To: _____

7a. Name and Mailing Address of Owners, Officers, Directors, and/or Partners	7b.	7c. Title	7d. % Ownership

### Section 2 - Description Of Business

8. The poultry firm is a (check all that apply)

<input type="checkbox"/> Slaughterer	<input type="checkbox"/> Broker (live)	<input type="checkbox"/> Meat Dealer or Broker
<input type="checkbox"/> Processor	<input type="checkbox"/> Dealer (live)	

### Section 3 - Live Poultry Purchases

9a. Did the firm purchase live poultry for slaughter? <input type="checkbox"/> Yes <input type="checkbox"/> No	9b. FSIS Establishment No.
10. Did the firm purchase live poultry to sell to a firm that slaughters? <input type="checkbox"/> Yes <input type="checkbox"/> No	

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11. Did the firm's purchases originate outside the state in which it was slaughtered?  Yes  No

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12. Total annual live poultry purchases \$ \_\_\_\_\_

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**Section 4 - Live Poultry Produced Under Growing Arrangements**

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13. Did firm obtain poultry using growing arrangements for its own slaughter?  Yes  No

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14. Did firm sell or contract poultry obtained using a growing arrangement?  Yes  No

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15. Did obtained poultry originate outside the state in which it was slaughtered ?  Yes  No

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16. Number of growers with growing arrangements \_\_\_\_\_

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17. Estimated yearly value of the poultry obtained under growing arrangements annually \$ \_\_\_\_\_

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**Section 5 - Poultry Product Sales**

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18. Did the firm manufacture or prepare poultry products and then sell or ship those products outside the state of slaughter?  Yes  No

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19. Did the firm manufacture or prepare poultry products and then sell or ship those products to the U.S. Government?  Yes  No

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**Section 6 - Poultry Product Sold**

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20. Total dollar amount sales of poultry products and by-products sold on an annual basis? \$ \_\_\_\_\_

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**Section 7 - Remarks**

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21. Use this space for additional information or explanation for any numbered items above, making reference to the item number.

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**Section 8 - Certification**

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\_\_\_\_\_  
22. Signature

\_\_\_\_\_  
23. Title

\_\_\_\_\_  
24. Date

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The Packers and Stockyards Act provides in part that “any person who shall willfully make, or cause to be made, any false entry or statement of fact in any report required to be made under this Act ... shall be deemed guilty of an offense against the United States, and shall be subject, upon conviction in any court of the United States of competent jurisdiction, to a fine of not less than \$1,000 nor more than \$5,000, or to imprisonment ...”

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**Instructions to Complete  
Live Poultry Dealer Inquiry  
Form P&SP-1500**

This form is used by each individual, corporation, or association engaged in business as a poultry dealer and is required by Section 201.94 and section 201.100 of the regulations under the Packers and Stockyards Act, 1921, as amended and supplemented.

Mail the completed form to the regional office of the Packers and Stockyards Program that covers your state. The states covered by each regional office are listed below the regional office's address.

<b>Regional Offices of the Packers and Stockyards Program Grain Inspection, Packers and Stockyards Administration</b>		
<b>Eastern Regional Office</b> Suite 230 75 Spring Street Atlanta, GA 30303-3308 Telephone: (404) 562-5840 FAX: (404) 562-5848 e-mail: <a href="mailto:PSPAtlantaGA.GIPSA@usda.gov">PSPAtlantaGA.GIPSA@usda.gov</a>	<b>Western Regional Office</b> 3950 Lewiston St., Suite 200 Aurora, CO 80011-1556 Telephone: (303) 375-4240 FAX: (303) 371-4609 e-mail: <a href="mailto:PSPDenverCO.GIPSA@usda.gov">PSPDenverCO.GIPSA@usda.gov</a>	<b>Midwestern Regional Office</b> Room 317 210 Walnut Street Des Moines, IA 50309-2110 Telephone: (515) 323-2579 FAX: (515) 323-2590 e-mail: <a href="mailto:PSPDesMoinesIA.GIPSA@usda.gov">PSPDesMoinesIA.GIPSA@usda.gov</a>
States Covered	States Covered	States Covered
AL, AR, CT, DC, DE, FL, GA, LA, MA, MD, ME, MS, NC, NH, NJ, NY, PA, RI, SC, TN, VA, VT, WV	AK, AZ, CA, CO, HI, ID, KS, MT, NM, NV, OK, OR, TX, UT, WA, WY	IA, IL, IN, KY, OH, MI, MO, MN, ND, NE, SD, WI

Additional copies of the report may be obtained from the regional office covering your state. All inquiries concerning any section or part of a section contained in the report can also be addressed to that regional office.

Line No.	Subject	Instructions
<b>Section 1-General Information</b>		
1	Name and Address	Enter the name and street, city, state, and zip code of the poultry firm. If you are completing the form as an individual, list your personal name and mailing address.
2	Type of Organization	Check the appropriate box to indicate the type of organization as it applies to the business's operation.
3a through 3c	Phone, Fax, Cell Phone Numbers	Enter the firm's telephone number(s), fax number(s), and the cell phone number(s) of the owner(s) of the firm.
4	E-mail Address	Enter the e-mail address of the firm or of one of its owners.
5	State Formed, Date Formed	If the type of firm is not "individual," enter the state where the organization was formed and the date that it was formed.
6	Fiscal Year	If the firm operates on a fiscal year enter the end month and day for the fiscal year for which the report is providing information.
7a through 7d	Name and Address of Owners, Officers, Directors, and/or Partners	For each owner and every partner, enter their name, title, respective percentage of ownership, and their personal mailing address (street, city, state, and 9 digit zip code). Provide this information for every individual with any ownership interest in the applicant's operation.  For every officer and each director, enter their name, title, and their personal mailing address (street, city, state, and 9 digit zip code).
<b>Section 2 – Description Of Business</b>		
8	The poultry Firm is A	Check the appropriate box to indicate what activities within the poultry business your firm conducts.
<b>Section 3 – Live Poultry Purchases</b>		
9a and 9b	Did the Firm Purchase Live Poultry for Slaughter	Check the appropriate box(es) to indicate if the firm purchased live poultry for slaughter in the past year. If you check "Yes," write the FSIS establishment number on line number 9b.
10	Did Firm Purchase Live Poultry to Sell to a Firm that Slaughters	Check the appropriate box to indicate if the firm purchased live poultry to sell to another firm that slaughters.

Line No.	Subject	Instructions
11	Did the Firm's Purchases Originate Outside of the State in Which Slaughtered	Check the appropriate box to indicate if the firm's purchases originated outside of the state in which it was slaughtered.
12	Total Cost of Live Poultry Purchased for Firm's Account in a Year	Enter the total cost of all poultry purchased for the firm's account for the past year.
<b>Section 4 - Live Poultry Produced Under Growing Arrangements</b>		
13	Did Firm Obtain Poultry Using a Growing Arrangement for Its Own Slaughter	Check the appropriate box to indicate if the firm obtained poultry using a growing arrangement for the poultry's own slaughter.
14	Did Firm Sell or Contract Poultry Obtained Using a Growing Arrangement	Check the appropriate box to indicate if the firm sold or purchased poultry obtained using a growing arrangement.
15	Did Poultry Obtained Originate Outside of the State in Which Slaughtered	Check the appropriate box to indicate if the poultry obtained by the firm originated outside of the state in which the poultry was slaughtered.
16	Growers with Growing Arrangements	Enter the number of growers with growing arrangements. Enter the names of growers with growing arrangements. List the names of the growers in the space provided under Section 7.
17	Estimated Yearly Value of the Poultry Obtained Under Growing Arrangements	Enter the estimated yearly dollar value of poultry obtained under growing arrangements.
<b>Section 5-Poultry Product Sales</b>		
18	Did the Firm Sell or Ship Any Poultry Products Manufactured or Prepared by It Outside the State for Slaughter	Check the appropriate box to indicate if poultry products your firm manufactures or prepares are sold or shipped to another state.
19	Did the Firm Sell or Ship Any Poultry Products Manufactured or Prepared by It to the U.S. Government	Check the appropriate box to indicate if poultry products your firm manufactures or prepares are sold or shipped to the U.S. Government.
<b>Section 6 - Poultry Product Sold</b>		
20	Total Sales	Enter the total sales of poultry products and by-products sold during the last fiscal year.

<b>Section 7-Remarks</b>		
21	Remarks	Enter additional information or provide explanations for any numbered items above. Include the list of names of growers with growing arrangements.
22	Signature	An owner or officer of the firm must sign line number 22.
23	Title	Enter the official title of the person signing.
24	Date	Enter the date that the form was signed.