

HATCHERY CAPACITY REPORT January 1, 2016

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Please make corrections to name, address and ZIP Code, if necessary.

The information you provide will be used for statistical purposes only. In accordance with the Confidential Information Protection provisions of Title V, Subtitle A, Public Law 107-347 and other applicable Federal laws, your responses will be kept confidential and will not be disclosed in identifiable form to anyone other than employees or agents. By law, every employee and agent has taken an oath and is subject to a jail term, a fine, or both if he or she willfully discloses ANY identifiable information about you or your operation. Response is voluntary.

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The valid OMB number is 0535-0004. The time required to complete this information collection is estimated to average 8 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

Please report for both Chicken and Turkey hatchery equipment and facilities owned by this operation.

CHICKENS

1. Does this operation currently have the equipment and facilities that can be used to hatch **chicks**?

110

Yes - Continue No - Go to item 3

2. Please report capacity for hatching **chicks** separately, as of January 1, 2016 for each hatchery in North Carolina. [Report the maximum number of eggs the Setters and Hatchers can hold at one time. Include inactive incubator capacity.]

LOCATION	CAPACITY of all SETTERS	+	CAPACITY of all HATCHERS	=	TOTAL
126	127	+	128	=	129
130	131	+	132	=	133
134	135	+	136	=	137

Total Capacity for Hatching Chicks 125

3. During 2015, were there any **chicks** hatched on this operation?

111

Yes - Continue No - Go to item 8

4. During 2015, how many **broiler-type chicks** were hatched on this operation?

NUMBER
112

- a. In the previous 12 months for your flocks raised for meat production in North Carolina, What was the average **livability** between the **hatchery** and the **processor** for **broiler-type chicks**? (For example: a 5.0% mortality rate equals 95.0% percent livability.)

PERCENT LIVABILITY
303 .__ %

5. During 2015, how many **egg-type chicks** were hatched on this operation?

NUMBER
102

6. During 2015, for all chicks sold or moved, what was the average price received for --

- a. **Broiler-type** chicks?

DOLLARS PER 100
304
\$.__

- b. **Egg-type** chicks?

305
\$.__

7. During 2015, what was the average **price** paid for fertile broiler-type and egg-type eggs?

DOLLARS PER DOZEN
307
\$.__

Continue on back

TURKEYS

8. Does this operation currently have the equipment and facilities that can be used to hatch **poults**?

210

Yes - Continue No - Go to item 10

9. Please report capacity for hatching poults separately, as of January 1, 2016 for each hatchery in North Carolina.

[Report the maximum number of eggs the Setters and Hatchers can hold at one time. Include inactive incubator capacity.]

LOCATION	CAPACITY of all SETTERS	+	CAPACITY of all HATCHERS	=	TOTAL
226	227	+	228	=	229
230	231	+	232	=	233
234	235	+	236	=	237
Total Capacity for Hatching Poults					225

10. During 2015, were there any poults hatched on this operation?

211

Yes - Continue No - Go to Comments

11. During 2015, how many poults were hatched on this operation?

NUMBER

212

12. During 2015, what was the average price received for all poults sold or moved from this operation?

DOLLARS PER POULT

306

\$. _ _

Survey Results: To receive the complete results of this survey on the release date, go to www.nass.usda.gov/results

Would you rather have a brief summary mailed to you at a later date? Yes No

OFFICE USE

9990

Comments:

Respondent Name:	9911	9910	MM	DD	YY
	Phone: (____) _____	Date:	____	____	____

THANK YOU FOR YOUR COOPERATION

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Response	Respondent	Mode	Enum.	Eval.	R. Unit	Change	Office Use for POID						
1-Comp	9901	1-Op/Mgr	9902	1-Mail	9903	9998	9900	9921	9985	9989			
2-R		2-Sp		2-Tel						-----			
3-Inac		3-Acct/Bkpr		3-Face-to-Face									
4-Office Hold		4-Partner		4-CATI									
5-R - Est		9-Oth		5-Web									
6-Inac - Est				6-e-mail									
7-Off Hold - Est				7-Fax									
				8-CAPI						9907	9908	9906	9916
				19-Other									

S/E Name