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 OMB control number for this information collection is 0579-XXXX. The time required to complete this information collection is estimated to average .5 hours 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.

OMB Approved 0579-XXXX Exp.: XX/XXXX

United States Department of Agriculture

Appraisal and Indemnity Request for HPAI-Affected Premises

Animal and Plant Health Inspection Service Veterinary Services		Using Contract Growers			
Premises ID where birds are located:					
Address where birds are located:					
	Contract Grower Inform	ation			
Name:	Phone Number:		Email Address:		
Address:					
Poultry Owner Information					
Name:	Phone Number:	ation .	Email Address:		
Address:					
Address.					
The (State Official) and (APHIS Official) have determine	ned that poultry on this premises	are affected by	v HPAI and the po	oultry must be depopulated within	
24 hours. Indemnity for destroyed poultry and eggs affected by HPAI will be based on their fair market value, as determined by the current USDA APHIS					
indemnity calculators. In cases where the destroyed peggs will be split between the Contract Grower and Po			ct Grower, the ap	praised value of the poultry and	
Divide the value of the contract the Owner entered into with the Grower for the growing and care of the poultry or eggs (<i>in dollars</i>) by the					
duration of the contract (i.e., number of days in the contract duration) as it was signed prior to the outbreak.					
2. Multiply this value by number of days between the date the Grower started to provide services for the destroyed poultry or eggs and the date					
the poultry or eggs were destroyed. This is the maximum amount of Federal indemnity the Contract Grower is eligible to receive, if Federal indemnity is approved for the destroyed birds or eggs.					
3. If the Grower has received any payment from the Owner under his/her contract prior to the date when the poultry or eggs are destroyed, then					
the Federal indemnity the Contract Grower	the Federal indemnity the Contract Grower is eligible to receive will be reduced by this amount.				
4. If Federal indemnity is approved for the destroyed birds and/or eggs, the Poultry Owner will receive the difference between the total indemnity shown on the VS Form 1-23, Appraisal and Indemnity Claim, and the total indemnity paid to the Contract Grower.					
5. In the event that determination of indemnity to a party with which the Poultry Owner of destroyed poultry or eggs has entered into a contract					
for the growing or care of the poultry or eggs using the method described in 1-4 of this section is determined to be impractical or inappropriate, APHIS may use any other method for split payments that the Administrator deems appropriate.					
Initial 1-5 and sign below:	dayments that the Administrator t	дееніз арргорі	iate.		
1. At the time of the outbreak, I had in place and was following a biosecurity plan to prevent the introduction of Avian Influenza.					
•					
	. I will provide barn and mortality records that verify the current inventory of poultry and eggs on the premises, which includes the number, age, and molt status (<i>if applicable</i>) of the birds and the total number of eggs that must be destroyed.				
•	4. I agree to accept the fair market value of the birds as determined by the APHIS calculator and the division of the indemnity payment between the Grower and Owner as described above.				
5. I agree to provide APHIS with a copy of the current contract executed between the parties as well as any supporting documentation					
deemed necessary by APHIS to determine the appropriate division of the indemnity payment. This includes any checks or statements indicating partial payments or advances already paid in association with the destroyed birds or eggs.					
Signature:	anday paid in addociation with	Printed Name			
organica.		. mitod Name	.		
Title		Doto:	Г	Check One:	
Title:		Date:		Owner Grower	