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OMB Approved
0579-0007
EXP: XX/XXXX

**UNITED STATES DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE
NATIONAL POULTRY IMPROVEMENT PLAN
FLOCK INSPECTION AND CHECK-TESTING REPORT**

1. CLASSIFICATION

2. FLOCK OWNER (Name and address)

3. SUPPLY FLOCK FOR (Name and address of hatchery 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