

**UNITED STATES DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE
VETERINARY SERVICES**

**SCRAPIE SFCP FLOCK INSPECTION REPORT
Annual Inspection Report for Scrapie Free Flock Certification Program
Export Category Flocks**

Flock ID	Owner Name, Address, and Email Address	Flock Location(s) if Different	
Premises ID			
Telephone			
Inspector		Inspector ID	Inspector Initials
Inspection Date	County	Latitude	Longitude

Flock Inspection for (check one): Export Monitored Flock Export Certified Flock

Type of Operation (check all that apply and circle primary activity)

- Breeder (seed stock)
- Commercial (breeder)
- Club Lamb/Kid
- Dairy
- Other _____

Veterinary Practitioner Name

Species Predominant Breed(s)

INVENTORY	SHEEP	GOATS
Adult males (≥ 12 mos)		
Adult females (≥ 12 mos)		
Males (<12 mos)		
Females (<12 mos)		
Wethers (<12 mos)		
Wethers (≥ 12 mos)		
TOTAL		

INSPECTION CHECKLIST

If "No" for any item, explain in comments.

Yes	No	
<input type="checkbox"/>	<input type="checkbox"/>	Sheep and goats inspected and found free of clinical signs of scrapie.
<input type="checkbox"/>	<input type="checkbox"/>	Sheep and goats inspected and inventoried and those over 12 months of age are officially identified.
<input type="checkbox"/>	<input type="checkbox"/>	Animal inventory reconciled with previous year's inventory and any discrepancies were resolved.
<input type="checkbox"/>	<input type="checkbox"/>	Reviewed requirement and procedure for reporting of scrapie suspect animals and animals found dead, and submission of samples.
Written or computer records match the inventory made during the inspection and records track the following information:		
<input type="checkbox"/>	<input type="checkbox"/>	Official and any secondary identification or marks. If "Yes," type of official ID:
<input type="checkbox"/>	<input type="checkbox"/>	Sex.
<input type="checkbox"/>	<input type="checkbox"/>	Species and breed (or cross), or if breed unknown type (sheep: meat, dairy, or fiber and face color; goats: meat, dairy, or fiber).
<input type="checkbox"/>	<input type="checkbox"/>	Date of birth or estimated month and year of birth.
<input type="checkbox"/>	<input type="checkbox"/>	Flock of origin (name and address of previous owner) and date of entry for those not born in flock.
<input type="checkbox"/>	<input type="checkbox"/>	For registered animals, the registry and registration number.
<input type="checkbox"/>	<input type="checkbox"/>	Information on genotyping, if known.
<input type="checkbox"/>	<input type="checkbox"/>	Animal acquisitions: in addition to the items listed above, flock of origin ID number, status and status date in the SFCP at time of acquisition.
<input type="checkbox"/>	<input type="checkbox"/>	Animal deaths: official ID, date died/found dead, diagnosis/cause and documentation of results of scrapie testing completed.
<input type="checkbox"/>	<input type="checkbox"/>	Animals sold/removed: official ID, reason removed, date removed and name/address of buyer.
<input type="checkbox"/>	<input type="checkbox"/>	Animals sold as SFCP-enrolled animals: the buyer was provided with the required records.
Flock owner reported or the inspector noted the following activities since last inspection (If "Yes" for any item, explain in comments.):		
<input type="checkbox"/>	<input type="checkbox"/>	Commingling of sheep/goats with sheep/goats of another flock or resided on the premises of another flock.
<input type="checkbox"/>	<input type="checkbox"/>	Purchase of ewes/does and/or rams/bucks from another flock.
<input type="checkbox"/>	<input type="checkbox"/>	Use of semen and/or embryos, and/or sheep or goat milk or colostrum or products derived therefrom.
<input type="checkbox"/>	<input type="checkbox"/>	Failure to officially identify animals or to maintain accurate records, including a current inventory.
<input type="checkbox"/>	<input type="checkbox"/>	Failure to provide records to purchasers of animals sold as enrolled animals.
<input type="checkbox"/>	<input type="checkbox"/>	Failure to report animals exhibiting clinical signs of scrapie or to submit samples from these animals and animals found dead at over 18 months of age.

Attach Copy of Flock Inventory

Comments (if more space needed, use an attached sheet):

Flock Owner Signature	Date								
AVIC Signature	<table border="1"> <tr> <td>Flock Meets Program Standards</td> <td>Date</td> </tr> <tr> <td><input type="checkbox"/> Yes <input type="checkbox"/> No</td> <td></td> </tr> <tr> <td>Eligible for Advancement</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Yes <input type="checkbox"/> No</td> <td></td> </tr> </table>	Flock Meets Program Standards	Date	<input type="checkbox"/> Yes <input type="checkbox"/> No		Eligible for Advancement		<input type="checkbox"/> Yes <input type="checkbox"/> No	
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