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 control number for this information collection is 0579-0040. The time required to complete this information collection is estimated to average 1 hour 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 0579-0040 EXP. XX/XXXX

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

INSPECTION REPORT OF ESTABLISHMENT FOR IMMEDIATE SLAUGHTER IMPORT ANIMALS

INSPECTION REPORT						
1. REPORT TYPE:	2. DATE OF INSPECTION	•		3. LIVESTOCK COUNTRY OF ORIGIN:		
☐ INITIAL INSPECTION ☐ REINSPECTION						
4. NAME OF ESTABLISHMENT:						
5 MAILING ADDDESO						
5. MAILING ADDRESS:						
6. PHYSICAL ADDRESS (if different than mailing):						
ζ,						
7. ADMINISTRATOR/MANAGER (print name):			8. EMAIL A	ADDRESS:		
9. FACILITY POINT OF CONTACT (print name):			10. EMAIL	ADDRESS:		
11. FEDERAL ESTABLISHMENT NUMBER:		12. STATE EST	TABLISHME	:NT NUMBER:		
13. TYPE OF CARRIER TO BE USED:						
☐ TRUCK ☐ OTHER						
14. DOES CHUTE EXIST TO UNLOAD DIRECTLY INTO DESIGNATED PENS AT ESTABLISHMENT?						
☐YES ☐NO (explain in box 24) 15. NUMBER AND MARKINGS OF DESIGNATED PENS:						
16. SPECIES OF ANIMAL TO BE IMPORTED:						
CATTLE BISON SHEEP GOAT CERVID YAK SWINE OTHER 17. EMPLOYEE(S) DESIGNATED TO BREAK SEALS						
FULL NAME:		POSITION:	:			
FULL NAME:	POSITION					
FULL NAME:	POSITION:					
FULL NAME: POSITION:						
18. SIGNATURE OF (State or Federal) MEAT INSPI	ECTOR:					
	FOR I	MEXICO ONLY				
19. DO FACILITIES EXIST AT ESTABLISHMENT FOR CLEANING AND DISINFECTION OF CARRIER AFTER UNLOADING?						
☐YES ☐NO (provide location of C&D equipment	in box 25) SEMI-ANNUAL F	E-INSPECTION I	REPORT			
20. DATE OF LAST INSPECTION	<u> </u>					
24 ADE DESTRICTED ANIMALS HANDLED IN DE	CIONATED DENC AC DEOL	UDED2				
21. ARE RESTRICTED ANIMALS HANDLED IN DE	SIGNATED PENS AS REQU	IIKED!				
☐YES ☐NO (explain in box 26) 22. ARE PROVISIONS FOR BREAKING SEALS BE	ING FOLLOWED?					
□YES □NO (explain in box 27)						
23. ARE WRITTEN RECORD AND REPORT REQUIREMENTS FOLLOWED?						
A. All livestock or carcasses are properly identified and verified by the export health certificate provided for the load, and carcasses can be connected to the animal ID and importer/ exporter, per the written procedure guide developed by the facility.						
B. The facility maintains all records (i.e. weight tickets, sales slips, kill sheets, etc.) for 2 years for swine and 5 years for bovines, bison, sheep & goats, cervids and related ruminants. YES NO (explain in box 28)						

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 control number for this information collection is 0579-0212. The time required to complete this information collection is estimated to average XX 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 0579-0212 EXP. XX/XXXX

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

INSPECTION REPORT OF ESTABLISHMENT FOR IMMEDIATE SLAUGHTER IMPORT ANIMALS

		EXPLAINATION				
24. IF "NO" IS CHECKED IN BOX 14 EXPLAIN WHY CH	HUTE DOES NO	FEXIST TO UNLOAD DIRECTLY INTO DESIGNATED PENS AT ESTABLISHMENT.				
			□ NA			
25. IF "NO" IS CHECKED IN BOX 19 PROVIDE LOCATION OF CLEANING AND DISINFECTION EQUIPMENT.						
26. IF "NO" IS CHECKED IN BOX 21 EXPLAIN WHY RESTRICTED ANIMALS ARE NOT HANDLED IN DESIGNATED PENS AS REQUIRED.						
27. IF "NO" IS CHECKED IN BOX 22 EXPLAIN WHY PROVISIONS FOR BREAKING SEALS WERE NOT FOLLOWED.						
28. IF "NO" IS CHECKED IN BOX 23 EXPLAIN WHY RECORD AND REPORT REQUIREMENTS WERE NOT FOLLOWED.						
A.						
B.						
- -						
29. IF 'NO" IS CHECKED IN BOX 34 EXPLAIN WHY PLANT IS NOT RECOMMEND FOR APPROVAL.						
29. IF 'NO" IS CHECKED IN BOX 34 EXPLAIN WHY PLANT IS NOT RECOMMEND FOR APPROVAL.						
STATEMENT The management has been advised of the 'responsibilities to provide for breaking seals, and agrees to the proper unloading, handling and verified/ reconciled						
identification of import animals until inspected and releas	sed by the assig	ned Government inspector. The management also agrees to slaughter o	r render all livestock			
· · · · · · · · · · · · · · · · · · ·	Federal Animal	Health Officials before releasing any livestock other than imported livest	ock from the premises for			
any purpose. 30. RESPONSIBLE ESTABLISHMENT		31. SIGNATURE OF ESTABLISHMENT OFFICIAL:	32. DATE:			
5525. OROBEE EOT/IDEIGNIMENT		OT. GIGITATION E. G. LOTABEIGITIMENT OF FIGURE.	OZ. DATE.			
OFFICIAL NAME:						
TITLE:						
33. SIGNATURE OF VS INSPECTOR COMPLETING TI	HIS REPORT:	34. RECOMMEND PLANT BE APPROVED:	35. DATE:			
☐ YES ☐NO (explain in box 29) CERTIFICATION						
This is to certify that the establishment has full time veterinary supervision and should otherwise be approved to receive restricted import animals for immediate slaughter						
36. FEDERAL VETERINARIAN (<i>print name</i>): 37. FEDERAL VETERINARIAN (<i>signature</i>): 38. DATE:						
		(********)				
	1					