

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

**SCRAPIE SFCP FLOCK INSPECTION REPORT
Initial Flock Inspection for Export Monitored Status in the
Scrapie Free Flock Certification Program (SFCP)**

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

Type of Operation (check all that apply and circle primary activity) <input type="checkbox"/> Breeder (seed stock) <input type="checkbox"/> Commercial (breeder) <input type="checkbox"/> Club Lamb/Kid <input type="checkbox"/> Dairy <input type="checkbox"/> Other _____	INVENTORY		SHEEP	GOATS
	Adult males (≥ 12 mos)			
	Adult females (≥ 12 mos)			
	Males (<12 mos)			
	Females (<12 mos)			
	Wethers (<12 mos)			
	Wethers (≥ 12 mos)			
	TOTAL			
Veterinary Practitioner Name				
Species	Predominant Breed(s)			

Yes	No	INSPECTION CHECKLIST <i>If "No" for any item, explain in comments.</i>	
<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"/>	Discussed requirement and procedure for reporting of scrapie suspect animals and animals found dead, and submission of samples.	
<i>match the inventory made during the inspection and the records track the following information:</i>			
<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 is unknown type (sheep: meat, dairy, or fiber <i>and</i> 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.	
<i>The flock owner understands that in addition to the records above the following records need to be kept for 7 years:</i>			
<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 must be provided with the required records.	
<i>The implications of the following activities on flock status and status date were discussed:</i>			
<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.	
<input type="checkbox"/>	<input type="checkbox"/>	<i>Flock owner was given a copy of and was informed that he/she must comply with all requirements listed in the SFCP Standards.</i>	
<i>Attach Copy of Flock Inventory</i>			

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

Flock Owner Signature	Date	<input type="checkbox"/> Yes <input type="checkbox"/> No	Application Form Completed (VS Form 5-22)
		<input type="checkbox"/> Yes <input type="checkbox"/> No	Flock Owner Received a Copy of SFCP Standards
		<input type="checkbox"/> Yes <input type="checkbox"/> No	Flock Meets Program Standards
AVIC Signature	Date		