

HATCHERY CAPACITY REPORT January 2021

OMB No. 0535-0004
 Approval Expires: 3/31/2022
 Project Code: 158
 SurveyId: 2575



USDA/NASS - Georgia
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Please make corrections to name, address and ZIP Code, if necessary.

The information you provide will be used for statistical purposes only. Your responses will be kept confidential and any person who willfully discloses ANY identifiable information about you or your operation is subject to a jail term, a fine, or both. This survey is conducted in accordance with the Confidential Information Protection provisions of Title V, Subtitle A, Public Law 107-347 and other applicable Federal laws. For more information on how we protect your information please visit: <https://www.nass.usda.gov/confidentiality>. Response is voluntary.

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 number is 0535-0004. The time required to complete this information collection is estimated to average 8 minutes 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.

Please report for both CHICKEN and TURKEY hatchery equipment and facilities owned by this operation.

CHICKENS

1. Does this operation currently have the equipment and facilities that can be used to hatch chicks?

¹¹⁰ 1 Yes - Continue 3 No - Go to question 3

2. Please report capacity for hatching CHICKS separately, as of January 1, 2021 for each hatchery in Georgia.

[Report the maximum number of eggs the Setter and Hatchers can hold at one time.
 Include inactive incubator capacity.]

LOCATION	CAPACITY of all SETTERS	+	CAPACITY of all HATCHERS	=	TOTAL
126	127	+	128	=	129
130	131	+	132	=	133
134	135	+	136	=	137
Total Capacity for Hatching Chicks					125

3. During 2020, were there any chicks hatched on this operation?

¹¹¹ 1 Yes - Continue 3 No - Go to Turkeys, back page

4. During 2020, how many broiler-type chicks were hatched on this operation?
 (Include chicks destroyed).....

Number

112

a. In the previous 12 months for your flocks raised for meat production in Georgia, what was the average livability between the hatchery and the processor for broiler-type chicks?
 (For example: a 5.0% mortality rate equals 95.0% livability).....

Percent Livability

303

. ____ %

5. During 2020, how many egg-type chicks were hatched on this operation?
 (Include chicks destroyed).....

Number

102

6. During 2020, for all chicks sold or moved, what was the average price received for--

a. Broiler-type chicks?.....

Dollars per 100

304

\$. ____

b. Egg-type chicks?.....

305

\$. ____

7. During 2020, what was the average price paid for fertile broiler-type and egg-type eggs?.....

Dollars per Dozen

307

\$. ____

TURKEYS

1. Does this operation currently have the equipment and facilities that can be used to hatch poultts?

²¹⁰ 1 Yes - Continue 3 No - Go to question 3

2. Please report capacity for hatching POULTS separately, as of January 1, 2021 for each hatchery in Georgia.

[Report the maximum number of eggs the Setter and Hatchers can hold at one time. Include inactive incubator capacity.]

LOCATION	CAPACITY of all SETTERS	+	CAPACITY of all HATCHERS	=	TOTAL
226	227	+	228	=	229
230	231	+	232	=	233
234	235	+	236	=	237
Total Capacity for Hatching Poults					225

3. During 2020, were there any poultts hatched on this operation?

²¹¹ 1 Yes - Continue 3 No - Go to Conclusion

Number

212

4. During 2020, how many poultts were hatched on this operation?.....

Conclusion

Survey Results: To receive the complete results of this survey on the release date, go to: nass.usda.gov/results

To have a brief summary emailed to you, please enter your email address:

1095

Comments related to the information you reported:

Contact Information

Operation Email: (if different from above)

Operation Phone:

9937	9936 (_____) _____	check if cell phone <input type="checkbox"/>
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Respondent Name:

Respondent Phone: (if different from above)

9912	9911 (_____) _____	check if cell phone <input type="checkbox"/>	9910 MM DD YY Date: - - - -
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This completes the survey. Thank you for your help.

OFFICE USE ONLY										
Response		Respondent		Mode		Enum.	Eval.	Change	Office Use for POID	
1-Comp	9901	1-Op/Mgr	9902	1-PASI (Mail)	9903	9998	9900	9985	9989	
2-R		2-Sp		2-PATI (Tel)					- - - - -	
3-Inac		3-Acct/Bkpr		3-PAPI (Face-to-Face)						
4-Office Hold		4-Partner		6-Email					Optional Use	
5-R - Est		9-Oth		7-Fax			R. Unit			
6-Inac - Est				19-Other			9921		9907	9908
7-Off Hold - Est									9906	9916
S/E Name										