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OMB Approved
0579-0036

UNITED STATES DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE
ANIMAL CARE

INSPECTION REPORT

SECTION I - LICENSEE/REGISTRANT INFORMATION

1. NAME OF LICENSEE/REGISTRANT <i>(first, middle initial, last)</i> :	4. CUSTOMER IDENTIFICATION NUMBER:
2. DOING BUSINESS AS (DBA) <i>(if applicable)</i> :	5. USDA CERTIFICATE NUMBER:
3. FULL BUSINESS ADDRESS:	6. SITE NUMBER:

SECTION II - SPECIES INSPECTED

7. COUNT	8A. SCIENTIFIC NAME	8B. COMMON NAME
	TOTAL	

SECTION III - INSPECTION FINDINGS

9A. INSPECTION TYPE:	9B. INSPECTION DATE:
10. NARRATIVE REPORT:	

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SECTION IV - PREPARER AND RECEIVER INFORMATION

11A. NAME, TITLE, AND SIGNATURE OF PREPARER:	11B. INSPECTOR ID NUMBER:	11C. DATE:
12A. NAME, TITLE, AND SIGNATURE OF RECEIVER:		12B. DATE:

1. NAME OF FACILITY

2. CUSTOMER IDENTIFICATION NUMBER:

3. USDA CERTIFICATE NUMBER:

4. SITE NUMBER:

5. NAME AND TITLE OF INSPECTOR

6. INSPECTION DATE:

7. TEACHABLE MOMENT 1

SECTION

NARRATIVE

8. TEACHABLE MOMENT 2

SECTION

NARRATIVE

9. TEACHABLE MOMENT 3

SECTION

NARRATIVE

10. TEACHABLE MOMENT 4

SECTION

NARRATIVE