OMB APPROVED
0579-0101

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	**0**	**0**

Yes	No	INSPECTION CHECKLIST *If "No" for any item, explain in comments.*
☐	☐	**Sheep and goats inspected and found free of clinical signs of scrapie.**
☐	☐	**Sheep and goats inspected and inventoried and those over 12 months of age are officially identified.**
☐	☐	**Animal inventory reconciled with previous year's inventory and any discrepancies were resolved.**
☐	☐	**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:
☐	☐	Official and any secondary identification or marks. If "Yes," type of official ID:
☐	☐	Sex.
☐	☐	Species and breed (or cross), or if breed unknown type (sheep: meat, dairy, or fiber *and* face color; goats: meat, dairy, or fiber).
☐	☐	Date of birth or estimated month and year of birth.
☐	☐	Flock of origin (name and address of previous owner) and date of entry for those not born in flock.
☐	☐	For registered animals, the registry and registration number.
☐	☐	Information on genotyping, if known.
☐	☐	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.
☐	☐	Animal deaths: official ID, date died/found dead, diagnosis/cause and documentation of results of scrapie testing completed.
☐	☐	Animals sold/removed: official ID, reason removed, date removed and name/address of buyer.
☐	☐	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.):
☐	☐	Commingling of sheep/goats with sheep/goats of another flock or resided on the premises of another flock.
☐	☐	Purchase of ewes/does and/or rams/bucks from another flock.
☐	☐	Use of semen and/or embryos, and/or sheep or goat milk or colostrum or products derived therefrom.
☐	☐	Failure to officially identify animals or to maintain accurate records, including a current inventory.
☐	☐	Failure to provide records to purchasers of animals sold as enrolled animals.
☐	☐	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	**Flock Meets Program Standards** ☐ Yes ☐ No **Eligible for Advancement** ☐ Yes ☐ No	**Date**