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| ***SUBMITTER:*** |
| *Owner/Company name:* | *VAT number:* |
| *Contact person:* | *E-mail:* |
| *Company address:* | *ZIP:* | *Phone:* |

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| ***ANALYTICAL REPORT WILL BE SENT BY:*** | ***INVOICE WILL BE SENT TO: (if different from submitter)*** |
| Regular mail |  |  |
| E-mail |  |
| Report in English |  |

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| ***SAMPLING AND SUBMISSION DETAILS*** |
| Flock code |  | Production type |  |
| House / unit number |  | Date and time samples taken |  |
| Species / type of bird |  | Sample collector |  |
| Age of birds / age group |  | Days/Weeks | No of samples |  |
| Age birds arrived on farm |  | Days/Weeks | Date submitted |  |
| Number of birds in premises |  |  |  |

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| ***SAMPLE DETAILS (INDICATE SAMPLE NUMBERS):*** | ***ENVIRONMENTAL SWABS (PLEASE INDICATE AREA SAMPLED):*** |
| Boot swabs (number of pairs) |  | Floor |  |
| Composite faeces (min 2 x 150g) |  | Walls |  |
| Dust (min 25g) |  | Beams / Ledges |  |
| Meconium (min 25g) |  | Fans |  |
| Compost |  | Manure belt / Scratching areas |  |
| Environmental swab |  | Feeders |  |
| National Animal Health Control Program |  | Drinkers |  |
| FBO control |  | Nest boxes |  |
| Disinfection control |  | Egg belts |  |
| Other (please specify) | Other (please specify) |

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| ***Sample code*** | ***Samples to set up (individually / pooled)*** | ***Remarks*** |
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| ***COMPLETED BY THE LABORATORY:*** |
| *Arrival date and time of sample(s):* | ***Registration number (laboratory ID):*** |
| *Receptionist´s name and signature:* |

Please ensure that this form is completed fully and accurately. Missing, erroneous or incomplete data may result in delays in sending final reports. Samples must be sent in full compliance with the relevant postal regulations. Samples must be received at the laboratory in a timely manner to allow testing to begin within 3 days of sampling, if this is not possible a repeat sample will be required.