



ENVIRONMENTAL MONITORING REQUEST

Company

Farm Name & Address incl. post code

Producer Number (Layers only)

Contact Name

Contact number

Bird Type

Broiler	<input type="checkbox"/>
Broiler Breeder	<input type="checkbox"/>
Layer	<input type="checkbox"/>
Rearer	<input type="checkbox"/>
Duck	<input type="checkbox"/>
Turkey	<input type="checkbox"/>
Pheasant/Partridge	<input type="checkbox"/>

Production

Barn	<input type="checkbox"/>
Colony	<input type="checkbox"/>
Free Range	<input type="checkbox"/>
Organic	<input type="checkbox"/>
Rearing	<input type="checkbox"/>

House(s) Age (w/d)

Date Sampled Date Submitted

Date Placed: Mth Year

Test Type

Campylobacter	<input type="checkbox"/>
Coliforms	<input type="checkbox"/>
Enterococcus	<input type="checkbox"/>
ESBL	<input type="checkbox"/>
Pseudomonas	<input type="checkbox"/>
Shigella	<input type="checkbox"/>
TVC	<input type="checkbox"/>
TVC 22° & 37°	<input type="checkbox"/>
Yeast & Mould	<input type="checkbox"/>

Area Sampled

	Sampled Area	Area	
		Dirty	Clean
1	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>
2	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>
3	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>
4	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>
5	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>
6	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>
7	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>
8	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>
9	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>
10	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>
11	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>
12	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>