

Simple UB4MF data collection form for poultry farm

1. Farm ID								
2. Name of the farm owner								
3. Upazila	Rajbari Sadar							
4. Union								
5. Village								
6. GPS coordination-	lat:	lon:						
7. Type of farm:	a) Broiler	b) Sonali						
8. Batch ID								
9. Date of DOC arrival:	<table border="1" style="display: inline-table; border-collapse: collapse;"> <tr> <td style="width: 20px; text-align: center;">d</td> <td style="width: 20px; text-align: center;">d</td> <td style="width: 20px; text-align: center;">m</td> <td style="width: 20px; text-align: center;">m</td> <td style="width: 20px; text-align: center;">y</td> <td style="width: 20px; text-align: center;">y</td> </tr> </table>	d	d	m	m	y	y	10. Number of DOC:
d	d	m	m	y	y			
11. Total feed used (num. of bags)	-----	11. Date of sell:						
12. Bird number at sell:		12. Total weight at sell						
Access control of people		<input type="checkbox"/> Yes <input type="checkbox"/> No						
Feet and hands-wash with soap and water		<input type="checkbox"/> Yes <input type="checkbox"/> No						
Dedicated shoes for inside shed		<input type="checkbox"/> Yes <input type="checkbox"/> No						
Feeder, drinker and other equipment-proper C&D		<input type="checkbox"/> Yes <input type="checkbox"/> No						
Proper height for feeder and drinker		<input type="checkbox"/> Yes <input type="checkbox"/> No						
Proper disposal of dead birds within the farm boundary		<input type="checkbox"/> Yes <input type="checkbox"/> No						
No outside vehicle allowed inside the fence and no inside vehicle go outside the fence		<input type="checkbox"/> Yes <input type="checkbox"/> No						
proper cleaning of vaccination equipment		<input type="checkbox"/> Yes <input type="checkbox"/> No						
Develop own vaccinator from your staff		<input type="checkbox"/> Yes <input type="checkbox"/> No						
Farm area is fully fenced with chicken, duck, and dog proof		<input type="checkbox"/> Yes <input type="checkbox"/> No						
Feed placed in dry and elevated area		<input type="checkbox"/> Yes <input type="checkbox"/> No						
Control spill feed to control rat		<input type="checkbox"/> Yes <input type="checkbox"/> No						
Proper treatment of litter		<input type="checkbox"/> Yes <input type="checkbox"/> No						
lower part of the curtain fixed		<input type="checkbox"/> Yes <input type="checkbox"/> No						
NB: Record keeping frequency at the end of a batch.								

For ULO/VS/private vet use only

			Date:
Assessor's name:			Designation:
Antimicrobial used	Pack size	Number of packs	Advisor
			<input type="checkbox"/> Regi vet <input type="checkbox"/> Owner <input type="checkbox"/> Dealer <input type="checkbox"/> Quack <input type="checkbox"/> Representative
			<input type="checkbox"/> Regi vet <input type="checkbox"/> Owner <input type="checkbox"/> Dealer <input type="checkbox"/> Quack <input type="checkbox"/> Representative
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At the end of a batch			