

Florida Department of Agriculture and Consumer Services Division of Animal Industry Bureau of Diagnostic Laboratories

Contact Information:

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www.FreshFromFlorida.com/ai

AVIAN INFLUENZA / EXOTIC NEWCASTLE DISEASE POULTRY SURVEILLANCE SUBMISSION FORM

Chapter 585, Florida Statutes 5C-3.012 F.A.C.

Note: All documents and attachments submitted with this request are subject to public review pursuant to Chapter 119, F.S.

Order Supplies:		Results R	Reported To:		Accessio	on Number	
		f, Bureau of Animal Disease Control Poultry Programs Office					
Submission Forms Quantity	Division of Animal Ir	ivision of Animal Industry					
Return Shipping Yes No	407 S. Calhoun Stre	07 S. Calhoun Street, Tallahassee, FL 32399-0800					
Include address with order			Lab Use Only				
Owner			Location Type				
Name			☐ Animal Sales Market	☐ Backyard Flock	☐ Botanica	☐ NPIP Flock	
Address			Fair &	Live Bird	☐ Sick Bird	Other:	
City, State, Zip			Exhibition	Market	Investigation		
Phone County							
Email							
Submission Information: Collected By: Collection Date:							
Specimens Submitted							
Swab Type	Specimen ID	# of Bir Poole		Addition	Additional Information		
☐ Tracheal ☐ Cloacal ☐ Environm	ental						
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☐ Whole Bird Submission		# of birds		☐ Complete Necropsy			
Type of Test (Lab Use Only):							
☐ Comprehensive Diagnostic Work-Up ☐ RRT-PCR ☐ VI – Bird ☐] VI – Environmenta	Other:			
Please continue on another submission form if needed for additional samples.							