



Application and Agreement for Participation in the National Poultry Improvement Plan

Yes, I would like to become an NPIP Participant

Business Name _____

Owner(s) Name _____

Premises Address _____

City _____ State _____ Zip Code _____ County _____

Mailing Address _____

City _____ State _____ Zip Code _____ County _____

Phone Number _____ Email Address _____

Flock Type

Hatchery Independent Breeding Flock Dealer

Flock Product

Chickens Waterfowl Turkeys Upland Game Birds

Disease Classification

Pullorum Typhoid AI clean/monitored flock Other (please explain) _____

List of species of poultry

Total number of birds in Flock _____

Participation Requirements

- ✓ Flock must be test for Pullorum/Typhoid once every twelve months
- ✓ Have a copy of the Pullorum/Typhoid and other testing report sent to the State office
- ✓ Only bring in poultry from Pullorum/Typhoid clean sources or tested prior to introduction into flock.
- ✓ Comply with the NPIP rules and regulation outlined in the nation Poultry Improvement Plan and Auxiliary Provisions (www.poultryimprovement.org)
- ✓ Maintain a Biosecurity Plan
- ✓ Complete and submit report of sales of hatching eggs, chicks, and poults (VS 9-3) for all poultry leaving Kansas.

Owner Signature _____

Date _____