## **IOWA POULTRY ASSOCIATION**

8515 Douglas Avenue - Ste. 9 Urbandale, IA 50322-2924 Phone: (515) 727-4701 Ext.100 Fax: (515) 727-4707

Email: emily@iowapoultry.com

#### Interested Chick Dealers:

Thank you for your interest in the National Poultry Improvement Plan (NPIP) program. To better serve customers, and to ensure poultry health, the poultry industry created the NPIP. This is a national program supervised by state coordinators. Membership is voluntary, but members must agree to meet standards set by the NPIP.

Some of the advantages to joining the NPIP:

- 1. No extra testing required. Only the testing required by lowa rules.
- 2. Your products are advertised nationally in the NPIP directory at no charge.
- 3. Healthier Poultry NPIP has eliminated several poultry diseases.
- 4. Exporting to other states is easier.

Enclosed is the appropriate application. Please read this carefully. If you are interested in participating in the NPIP, <u>complete all applicable sections</u>. <u>Please note that stock codes are required</u>. <u>This list can be reviewed or downloaded at:</u> <u>http://www.poultryimprovement.org/documents/StockCodesAlphabetical4-28-2017.pdf</u> All incomplete applications will be returned.

Dealer fees are \$25 per store location. Please return the application and appropriate fee to our office.

Once your application is received and processed, an NPIP approval number will be assigned. A participation ID and a signed copy of your Memorandum of Agreement will be sent to you. Please call with questions.

Sincerely,

Emily Reynolds Iowa Poultry Association NPIP State Coordinator



# Iowa Poultry Association

## 2018/2019 DEALER APPLICATION

## Iowa National Poultry Improvement Plan

Iowa Poultry Association

The lowa Poultry Association, 8515 Douglas Avenue, Suite 9, Urbandale, lowa 50322-2924 Phone: 515-727-4701 Ext.100 Fax: 515-727-4707 Email: info@iowapoultry.com

#### Section I

\$25 Dealer feeper store(location)

| Con    | mpany name:        |       |      | Cor               | ntact person: |        |           |       |   |
|--------|--------------------|-------|------|-------------------|---------------|--------|-----------|-------|---|
| Phys   | sical Address      |       |      |                   |               |        |           |       |   |
| 1      |                    |       |      | City:             | State:        |        | ZIP:      |       |   |
|        | ing Address        |       |      |                   |               |        |           |       |   |
|        |                    |       |      | City:             | State:        |        | ZIP:      |       |   |
|        |                    |       |      |                   |               |        |           |       | _ |
|        |                    |       |      | NPIP numbe        |               |        |           |       |   |
|        |                    |       |      | N II II II III II |               | embers | leave bla | nk    |   |
| **Ente | er multiple stores | below |      |                   |               |        |           |       |   |
| IPIP#  | Company/Store      | First | Last | Site Address      | City          | ST     | Zip       | Phone |   |
|        |                    |       |      |                   |               |        |           |       |   |
|        |                    |       |      |                   |               |        |           |       |   |
|        |                    |       |      |                   |               |        |           |       |   |
|        |                    |       |      |                   |               |        |           |       |   |
|        |                    |       |      |                   |               | _      |           |       |   |
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|        |                    |       |      |                   |               |        |           |       |   |
|        |                    |       |      |                   |               |        |           |       |   |
| -      |                    |       |      |                   |               |        |           |       |   |

#### Section II:

Please check all categories below that apply to your operation.

| Subpart B: Commercial egg-type chickens: you must sell over 1,000 birds or hatching eggs to a single producer  Dealer of  Hatching eggs Chicks Started pullets Other (Specify) | Subpart C: Commercial Meat-Type Chickens  Dealer of  Hatching eggs Chicks Other  (Specify)   |
|--|--|
| Subpart D: Commercial Turkeys  Dealer of Hatching eggs Poults Other (Specify)  | Subpart E: Waterfowl, Exhibition Poultry, Game Birds, & Non-Commercial Poultry  Dealer of  Hatching eggs Chicks Adult birds  Other (Specify) |

#### **Section III**

Disease Classification of your operation—please check all that apply: (All testing for these classifications must be reported to the IPA office)

| DISEASE CLASS      | SUBPART<br>B | SUBPART<br>C | SUBPART<br>D | SUBPART<br>E |
|--------------------|--------------|--------------|--------------|--------------|
| PT                 |              |              |              |              |
| MG                 |              |              |              |              |
| MS                 |              |              |              |              |
| ММ                 |              |              |              |              |
| SAN MON            |              |              |              |              |
| SE                 |              |              |              |              |
| Al                 |              |              |              |              |
| OTHER<br>(Specify) |              |              |              |              |

#### **Section IV**

List poultry and/or hatching eggs that you offer for sale. (Please refer to varieties and codes listed in the appendices of your NPIP Directory of Participants or contact our office for a copy.)

| NPIP Code<br>(From NPIP Directory) | Description | NPIP Code<br>(From NPIP Directory) | Description |
|------------------------------------|-------------|------------------------------------|-------------|
| 1.                                 |             | 6.                                 |             |
| 2,                                 |             | 7.                                 |             |
| 3.                                 |             | 8.                                 |             |
| 4.                                 |             | 9.                                 |             |
| 5.                                 |             | 10.                                |             |

#### Section V:

List all sources of breeders, chicks, poults, or hatching eggs and the classification from those hatcheries, breeders or dealers.

| Type of Poultry | Supplier | State | P.T. | M.G. | M.S. | M.M. | San.<br>Mon. | S.E.<br>Mon. | Al | Other<br>(Specify) |
|-----------------|----------|-------|------|------|------|------|--------------|--------------|----|--------------------|
|                 |          |       |      |      |      |      |              |              |    |                    |
|                 |          |       |      |      |      |      |              |              |    |                    |
|                 |          |       |      |      |      |      |              |              |    |                    |
|                 |          |       |      |      |      |      |              |              |    |                    |
|                 |          |       |      |      |      |      |              |              |    |                    |

ONo

#### **Section VI**

Additional activities of your operation.

| 1. | Doyou actually take possession of the poultry             | y?        |      |
|----|---|-----------|------|
|    | Yes, they are delivered to our facility.                  |           |      |
|    | No, they are shipped directly from anot                   | her hatch | ery. |
| 2. | Doyoutake poultry to shows/exhibitions?  If yes, explain: | OYes      | ONo  |

#### **FINAL NOTES**

· Please read and sign the Memorandum of Agreement.

If yes, explain:

Do you purchase poultry from shows/exhibitions? OYes

 Rules and Regulations of the National Poultry Improvement Plan (NPIP), a listing of lowa's authorized tester's and a national listing of NPIP participants are available at iowapoultry.com

| Payme | ent se | ction |
|-------|--------|-------|
|-------|--------|-------|

Total Amount Due \$ \_\_\_\_\_

**Dealer Fee:** \$25 (per store or location)

| Credit Card | d number          |                       |
|-------------|-------------------|-----------------------|
| cvv         | Expiration _<br>m | onth (xx) year (xxxx) |

Please read and sign the following page before submitting your application to the address below.

Please send payment (with this form) to:

Iowa Poultry Association 8515 Douglas Avenue, Suite 9 Urbandale, Iowa 50322

Phone: 515-727-4701, x100; Fax: 515-727-4707

Email: info@iowapoultry.com

| OFFICE USE ONLY |
|-----------------|
| Date Rec'd:     |
| Amt. Rec'd:     |
| Check #:        |
|                 |

### **Memorandum of Agreement**

#### A. The Iowa Poultry Association Agrees:

- To permit the use of the prefix "U.S." in connection with the terms used in describing, advertising, and selling
  hatching eggs, babychicks, and breeding stock of the various classes of the National Poultry Improvement Plan
  when the proper quality is attained and when satisfied that proper compliance has been made to all rules and
  regulations of the National Poultry Improvement Plan and the Iowa Poultry Association.
- To direct and supervise work done relative to flock selection in the various breeding stages, testing for Pullorum and Typhoid diseases and hatchery operation as provided for in the National Poultry Improvement Plan
- · To conduct efficiently the inspection work called for in the National Poultry Improvement Plan.
- To report, upon detection, to the Veterinary Service Division of the U.S. Dept. of Agriculture, anymember of members of the poultry industry participating in, but not complying with the <u>Auxiliary Provisions</u> of the National Poultry Improvement Plan.

#### B. The breeder or hatcheryman or dealer agrees:

- To comply with the requirements of the above-named phases of the National Poultry Improvement Plan and rules and regulations of the Iowa Poultry Association.
- To keep records called for in the National Poultry Improvement Plan and to make such record accessible to representatives of the Iowa Poultry Association.
- To pay the fees for participation in the National Poultry Improvement Plan as follows: All applicable breeder fees, merchandise such as leg bands (where applicable) and other items at prices prescribed by the Iowa Poultry Association.
- That before any action is taken or caused to be taken by the cooperating breeder or hatcheryman against the lowa Poultry Association or any of its members or employees, the cooperating breeder or hatcheryman agrees to personally or by certified mail, present a written statement of his or her complaint to the lowa Poultry Association within twenty days before such action will be taken.

#### C. Revocation of Agreement:

- This agreement may be revoked by the Iowa Poultry Association for any violation pertaining to the National Improvement Plan. In case of revocation, the hatchery or farm owner or manager agrees to forfeit all fees paid to the Official State Agency. All rights and benefits of participation in the National Poultry Improvement Plan shall be forfeited for a period of two years. Upon revocation of this agreement, the Official State Agency is authorized to notify any or all cooperator(s) in the National Poultry Improvement Plan of the revocation.
- This agreement may also be revoked by the industry participating member by presenting a written statement to that effect to the lowa Poultry Association twenty days before the said revocation shall take effect.

# Signature area Participating Industry Member

| Participating industry Member |        |
|-------------------------------|--------|
| (Company Name)                | (Date) |
|                               | NPIP#  |
| (Owner or Manager)            |        |
| lowa Poultry Association      |        |
| (NPIP Contact for Iowa)       | (Date) |

This Memorandum of Agreement shall take effect immediately and shall continue through June 30, 2019, subject to renewal from year to year thereafter by mutual consent of the cooperating parties.