

## 2. Domestic Cervid Farm Inspection



AGRICULTURE AND RURAL  
DEVELOPMENT

### Domestic Cervid Production Farm Inspection Report Inspection and Investigation Branch

PRODUCER NAME: \_\_\_\_\_ FARM ID

CONTACT NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

TOWN: \_\_\_\_\_ POSTAL CODE: \_\_\_\_\_ SPECIES: \_\_\_\_\_

LAND LOCATION: \_\_\_\_ of \_\_\_\_ - \_\_\_\_ - \_\_\_\_ - W \_\_\_\_ GPS: N: \_\_\_\_\_ W: \_\_\_\_\_

TYPE OF INSPECTION: Routine:  Follow-up:  Pre-licence:

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#### A. Administration

	YES	NO
Licence Fee Paid	<input type="checkbox"/>	<input type="checkbox"/>
Inventory Report Submitted	<input type="checkbox"/>	<input type="checkbox"/>
Birth Report Submitted	<input type="checkbox"/>	<input type="checkbox"/>
Velvet Antler Report Submitted	<input type="checkbox"/>	<input type="checkbox"/>
Mandatory CWD Program Compliance	<input type="checkbox"/>	<input type="checkbox"/>

#### B. Herd Inspection

Number of Animals on CFS	Males: _____	Females: _____	Total: _____
Actual / Estimate of Animals	Males: _____	Females: _____	Total: _____
Cervid Tagging	Metal Tags: _____	Plastic Tags: _____	
Velvet Antler Tagged:	Yes: _____	No: _____	
Animal Husbandry	Adequate: _____	Needs Improvement: _____	

#### C. Facilities

Perimeter Fencing:	Overall Height: _____	Mesh Size: _____	
	Post size: _____	Height: _____	
	Gate Height: _____	Locked: _____	
Handling Facilities	In Place:	Yes: _____	No: _____
	Good Repair:	Yes: _____	No: _____

#### Comments and/or Corrective Action Plan:

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Inspection Date       (YYMMDD)

Code :

Producer's Signature: \_\_\_\_\_ Inspector's Signature: \_\_\_\_\_