

**CRATE BIOSECURITY RECORD
FOR POULTRY ENTERING NEW YORK LIVE BIRD MARKETING SYSTEM
THIRD PARTY CRATE BIOSECURITY VALIDATION**

MARKET NAME: _____

ADDRESS: _____

POULTRY DEALER / POULTRY TRANSPORTER: _____

TOTAL NUMBER CRATES DELIVERED _____ **DATE RECEIVED:** _____

Instructions for use:

Section 45.6(f) of the Department's regulations (1 NYCRR) requires a poultry dealer or poultry transporter who buys or sells poultry to be sold at a live poultry market to possess and utilize a working mechanical crate washer to clean and disinfect crates between uses. Section 45.6(f) also requires poultry dealers and poultry transporters to compile, maintain and make available for inspection, for a period of two years, records of the dates and times crates were cleaned and disinfected.

In order to comply with these requirements, this form shall be completed as follows:

Poultry Dealer or Poultry Transporter shall record delivery of the crates to the live poultry market by entering each crate's identification number in the boxes below.

Live Poultry Market shall record the receipt of each crate upon delivery by circling the individual crate number and signing and dating the Market Verification Statement below.

Crate Wash Facility shall indicate the receipt of each individual crate by placing a single line through the respective circled crate number and signing and dating the Wash Verification Statement below.

Example:

Dealer or Transporter: NY 5732

Live Poultry Market:

NY 5732

Crate Wash Facility:

~~NY 5732~~

Completed forms shall be compiled and maintained by the poultry dealer or poultry transporter.

CRATE IDENTIFICATION NUMBER

1.		16.		31.		46.	
2.		17.		32.		47.	
3.		18.		33.		48.	
4.		19.		34.		49.	
5.		20.		35.		50.	
6.		21.		36.		51.	
7.		22.		37.		52.	
8.		23.		38.		53.	
9.		24.		39.		54.	
10.		25.		40.		55.	
11.		26.		41.		56.	
12.		27.		42.		57.	
13.		28.		43.		58.	
14.		29.		44.		59.	
15.		30.		45.		60.	

MARKET VERIFICATION STATEMENT

I certify that the crates identified above were delivered to my business on the date indicated. I understand that the statements made on this record will be accepted, for all purposes, as the equivalent of an Affidavit. Any false statements made herein, in addition to being the possible basis for a revocation of any license or permit issued to me, may also be punishable under the provisions of Section 210.45 of the Penal Law of the State of New York.

Signature of Market Representative: _____ **Date:** _____

WASH VERIFICATION STATEMENT

CRATE WASH STATION NAME: _____ **DATE WASHED:** _____

I certify that the crates identified above were washed & disinfected at my facility on the date indicated. I understand that the statements made on this record will be accepted, for all purposes, as the equivalent of an Affidavit. Any false statements made herein, in addition to being the possible basis for a revocation of any license or permit issued to me, may also be punishable under the provisions of Section 210.45 of the Penal Law of the State of New York.

Signature of Crate Wash Representative: _____ **Date:** _____