

## HIGHLY PATHOGENIC AVIAN INFLUENZA RECOVERY REIMBURSEMENT GRANT FOR IMPLEMENTATION OF BIOSECURITY ENHANCEMENTS

### PLEASE PRINT OR TYPE IN BLUE OR BLACK INK ONLY- READ INSTRUCTIONS ON REVERSE SIDE

1. Applicant's Name:	
2. Payee(s)'s Name:	
PLEASE COMPLETE ON	LY ONE: A or B
A. Applying	g under Business/Farm Name
	BUSINESS EIN#
	g as individual(s) All individuals whose name appears on the Farm Name, along with their socionumber (SS#)
Payee 1:	Payee 2:
<u>SS #</u>	SS#
3. Owner(s):	
4. Business/Farm Name: _	
5. Address:	
6. City:	State Zip
7. Farm Location Address:	
8. City:	State:Zip:
9. Phone #: ()	10. Fax: () 11. Email:
12. Premise ID:	Federal Premise ID:
13. Brief Description of En Submission)	nancements: (Please Provide a Separate Description and Attach to Your Application
14. Production Type/Specie	s of Affected Premise:
15. Approved Biosecurity P	lan: Date of Last Review:
16. Amount for which you	nre seeking Reimbursement
unsworn falsifications to auth	provided on this application is true and correct. False statements are subject to penalties for norities (18 Pa. C.S.A. Section 4904). By providing your signature you are verifying that the costs ought have not otherwise been reimbursed or are eligible for reimbursement.
17. Applicant(s)'s Signatur	e:
	Date:



# HIGHLY PATHOGENIC AVIAN INFLUENZA RECOVERY REIMBURSEMNET GRANT FOR IMPLEMENTATION OF BIOSECURITY ENHANCEMENT GUIDELINES

Administered by the Pennsylvania Department of Agriculture to provide reimbursement to farms, integrators, and allied industries, directly impacted by Highly Pathogenic Avian Influenza (HPAI) for the implantation of biosecurity enhancements.

Eligible expenses for biosecurity implantation and enhancement:

#### (See Best Biosecurity Practice Examples on Page 3)

Reimbursements will be capped at \$25,000.00 per premise. Funds allocated to this initiative is \$2 million. All reimbursements are contingent on availability of funding.

Applications will be accepted until 90 days from grant announcement date.\*\*Extended Until February 2, 2024\*\*

1. Applicant's Name of individual completing this application.

- 2. Payee(s)'s Name: Please either complete A or B. If completing A, include the Farm Business Legal Name and its Employer Identification Number. If completing B, list all individuals who receive income from the farm and their social security number. (IE. In case of spouses, list both spouses and their social security numbers.)
- 3-11. Owners' contact information. This is where any and all correspondence, as well as the reimbursement check will be mailed. If you do not have a fax number or email address, you may leave that blank.
- 12. Premise ID number and Federal Premise ID. (if applicable)
- 13. Briefly describe the enhancements that were made.
- 14. Briefly describe the type of production conducted on your premise and/or the species type(s) located at your premise. (if applicable)
- 15. Indicate whether you have an approved biosecurity plan and provide the date it was last reviewed by the Department of Agriculture. (if applicable)
- 16. Amount for which you are seeking reimbursement: Attach all itemized invoices, bills, or receipts, as appropriate to the biosecurity implementation and enhancement expenses for which you are seeking reimbursement.
- 17. Applicant's Signature and Date: Please sign and date the application and return to the address below.

If you have any questions, or need additional information, please contact Morgan Sheffield at 717-787-3568 or by email at <a href="mailto:msheffield@pa.gov">msheffield@pa.gov</a>.

Submit Applications to: Pennsylvania Department of Agriculture

Attn: Morgan Sheffield 2301 North Cameron Street Harrisburg, PA 17110 Ph: 717-787-3568

Biosecurity 7/2023



#### **Best Biosecurity Starter Kit**

Biosecurity Starter Kit: Costs cover the following if your facility currently does not have these measures. Your biosecurity plan will be reviewed in this process, please provide any material and receipts to show the adjustments made to improve your poultry biosecurity. One foot pan, and Danish entry bench will be available per poultry barn. If you are able to show that these options below are not currently implemented in your operation. *Eligible expenses include, but are not limited to:* 

- 1 pair of barn boots
- 1 pair of coveralls
- 1st Disinfectant
- Foot Pan(s)
- Hand sanitizer
- Biosecurity Sign(s)
- Disinfectant pump sprayer
- Wild bird exclusion repairs (i.e. netting or wire material surrounding barn eaves/windows; construction materials used to close up holes or entry into barn buildings)

#### **Best Biosecurity Practices**

Biosecurity Improvements: Expenses include, but are not limited to:

- Uniforms (Disposable/Washable Overalls)
- Sprayers <a href="https://cropcareequipment.com/blog/truck-disinfect-system-can-help-prevent-hpai-spread/">https://cropcareequipment.com/blog/truck-disinfect-system-can-help-prevent-hpai-spread/</a> ( hose reel and hand gun as well as head to spray walls)
- Pump Room (max size of 8x10 or smaller)
- Danish entry Bench(s)
- Shelving
- Truck Washes for Feed Mills
- Road biosecurity sprayers Sprayer stations
- Disinfectant
- Vehicle Disinfection Stations
- End of Lane Drop Boxes

<u>Biosecurity Education</u>: Up to \$2,500, educational materials, events and time contributed and biosecurity materials can be reimbursed. *Eligible Expenses include, but are not limited to*:

- Plastic booties
- Hand sanitizer



Biosecurity Improvement for Pasture Birds: If you are able to prove that you are strictly pasture poultry with no barn access, apply for a grant to build a 'mobile barn' to provide some protection to your pasture poultry and help you achieve a biosecurity plan. Cost not to exceed \$10,000 per farm. *Eligible expenses include, but are not limited to:* 

- Funding to assist with wild bird mitigation on farm. Funding to help with USDA Wildlife Services contract payment.
- Fencing to prevent access