According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0579-0101. The time required to complete this information collection is estimated to average 2 hours per response, including the time for reviewing instructions, search existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

FORM APPROVED OMB NO. 0579-0101

## U.S. DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE VETERINARY SERVICES

## APPLICATION FOR SCRAPIE CLASSIFICATION, CLASSIFICATION RENEWAL, OR RECLASSIFICATION OF A STATE (CFR part 79 section 79.6)

1. STATE		2. OR AREA SMALLER THAN A STATE					
CONSISTENT STATUS		3. APPLICATION	FOR ("X" one)	REINSTATEMENT OF CO	NSISTENT STA	THIS	
RENEWAL OF CONSIST	ENT STATUS			STAGE			
131-7		4. QUALIFICATION	/"Y" all that apply)				
The requirements of 9 (	CFR part 79 section 79.6 have b	and Sections assessment of the part of the section of	х ан тат арруу)				
	•						
State program standards	orces a State designed scrapie s, legal authorities, and other so nd the alternate methods being	apporting documentation are	effective in controlling scrapie re attached. (The supporting o	as the requirements of 9 ( locumentation must include	CFR part 79 sec le which require	ction 79.6. ement(s) of	
The Scraple National Ge	neric Database is continuously	updated and all the data is	accurate and complete for the	reporting period.			
I have reviewed the RSS	S report for the reporting perio	d and it is accurate and con	rect.				
		STAT	E				
		5. FLOCK AND HERD PO	PULATION OF STATE				
A. TOTAL NO. SHEEP FLOCKS	B. TOTAL NO. GOAT HERDS	C. NO. OF BREEDING SHEEP	D. NO. OF BREEDING GOATS	E. TOTAL NO. OF SHEEP	F. TOTAL GOA		
6. DETERMINED BY				7. REP	ORT DATES		
A. FROM						B. TO	
	EXPOS	ED AND HIGH RISK ANIMA	ALS		Sheep	Goats	
8. Number of animals design	nated exposed or high risk.		100 feet				
9. Number of animals design	nated exposed or high risk for v	which tracing was required.					
10. Number of animals desig	nated exposed or high risk suc	ccessfully traced.					
	nated exposed or high risk tha		traced.				
12. Number of high risk anim	nals tested for Scraple.						
13. Number of high risk anim	nals tested positive.						
	SUF	VEILLANCE AND TRACES					
14. Number of targeted anim							
15. Number of animals originals	nating from flocks in the State :	sampled for targeted survei	llance other that at slaughter (	if > (0) list sources.)			
16. Number of postive anima	als originating from flocks in th	e State identified through ta	argeted surveillance.				
THE CONTRACTOR STATE OF THE STATE OF	s identified through slaughter						
CAR ACCOUNT OF THE PARTY OF THE	eillance (+) animals collected in						
	eillance (+) animals collected o						
	eillance (+) animals that could					_	
	ource flocks not on plans over t		ort date (if > (0) explain in rem	arks.)		-	
22. Number of flocks in plan	status over 6 months (if > (0) e	The second secon	OF ANIMAL C				
		IDENTIFICATION					
23. Percent of breeding animals identified as required in 9 CFR 79.2			24. Percent of slaughter animals over 18 months identified as required in 9 CFR 79.2.				

25. Method of determination

26. Owner's were notified in accordance with 9 CFR Part 79.4(c)	Yes	No (Explain any exception	ns.) (If more space is n	eeded, use an attachment sheet.)
				4
		100000		
		1 700		
	400			to the light
27. REMARKS	н			
	CERTIFI	CATION		
The provisions of 9 CFR parts 54 and 79 have			to be declared Con-	-t-tt
The provisions of 9 CFR parts 54 and 79 hav			te be declared Cons	sistent.
28. Signature of State Official	29. Plea	se Type or Print Name		30. Date
31. Signature of Federal Veterinarian in Charge	22 Plan	es Time or Brief Name		22 Date
31. Signature of Federal Veterinarian in Charge	32. Plea	se Type or Print Name		33. Date
34. The Veterinary Services hereby declares the above State Consistent for	for the perio	d beginning	and ending	
			sinang	
35. Signature of Certifying Official	36. Plea	se Type or Print Name		37. Date