

**TODAY'S DATE:**  
\_\_\_\_\_

**Certificate EXPIRATION**

**DATE:** \_\_\_\_\_

**\*It is your responsibility to submit app at least 120 days before certificate expires.**



# APPLICATION FOR CERTIFICATION OF PIG OPERATIONS

## GENERAL INFORMATION

PRODUCER NAME			
FARM NAME			
FARM ADDRESS		MAILING ADDRESS (IF DIFFERENT)	
COUNTY (for US producers):			
ORGANIZATIONAL STRUCTURE	<input type="checkbox"/> Sole Proprietor <input type="checkbox"/> S-Corporation <input type="checkbox"/> Limited Liability Corporation <input type="checkbox"/> Corporation <input type="checkbox"/> Non-Profit Organization <input type="checkbox"/> Other (please specify) _____		
ON FARM CONTACT			
TELEPHONE NO:	WEB ADDRESS/WEBSITE:	MOBILE NO:	
FAX NO:		EMAIL:	
OTHER CONTACT			
TELEPHONE NO:	FAX NO:	MOBILE NO:	
		EMAIL:	
MEMBER OF POOLED PRODUCT OPERATION/ PRODUCER GROUP? <input type="checkbox"/> Yes <input type="checkbox"/> No	NAME OF POOLED PRODUCT OPERATION/ PRODUCER GROUP:		
List Brand Name(s) product is sold under			
OTHER ADDRESSES USED FOR HOUSING/PASTURING STOCK (or separate postal address)	1	2	
MILES FROM MAIN UNIT			
MANAGED AS MAIN UNIT?	YES/NO	YES/NO	

*For more locations, provide the same details as above for other sites on a separate attached piece of paper.*

TYPE OF UNIT <i>Circle as appropriate</i>	Unweaned	Weaned	Nursery	Growing	Finishing
	Gilts	Boars	Dry Sows	Lactating Sows	
Total No of Pigs:	Weaned: Sows sold:	Growers sold: Boars sold:	Finished sold:	Gilts sold:	
Are piglets purchased from an outside source?	YES	NO	If YES, Name/ Address of Supplier		
Name and Address of Processor <i>(must complete Universal Application)</i>					

Are animals transported by farm personnel? <i>YES</i> <i>NO</i>	If <i>NO</i> , Name/Phone No. of company used	Are haulers trained in emergency care? <i>YES</i> <i>NO</i>
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## FARM QUESTIONNAIRE: PIGS

### 1) HERD BIOSECURITY POLICY

- |  |   |   |
|--|---|---|
| a. Do you have a herd biosecurity policy in place?   | Y | N |
| b. If yes, are persons who work on farm informed about all biosecurity measures?               | Y | N |
| c. Do vehicles entering farm premises have access restricted to specific areas of farm?        | Y | N |
| d. Are visitors required to wear boots and other protective clothing?                          | Y | N |
| e. Is visitor access restricted to specific areas of the farm, pending owner/manager approval? | Y | N |
| f. Are work routines used to minimize disease transfer between animal groups?                  | Y | N |
| g. Are sick animals segregated from the rest of the herd?                                      | Y | N |

If yes, where? \_\_\_\_\_

If no, why not? \_\_\_\_\_

### 2) FEED AND WATER

#### Feed Suppliers

**Name:**

Address:

Telephone No.:

Mills Used:

**Name:**

Address:

Telephone No.:

Mills Used:

**Name:**

Address:

Telephone No.:

Mills Used:

Is feed free from all mammalian derived protein, except milk, and milk products? Y N

Is feed free from growth promoters and sub-therapeutic antibiotics? Y N

Are feed ingredient tags available for at least one year? Y N

Are basic rations for each grouping of animals available for at least one year? Y N

**Feed records retention – keep a representative ingredient tag for each ingredient used. Replace old tags with current tags as rations change.**

Are feeders filled manually or automatically? \_\_\_\_\_

How often are feeders cleaned? \_\_\_\_\_

How much feeder space is available for animals to use? \_\_\_\_\_

How many days supply of feed is available on the farm? \_\_\_\_\_

Are swine kept on pastures? Y N

Is animal access to poisonous plants or unsuitable feedstuffs prevented? Y N

**Commodity Feed Area**

Is feed kept covered? Y N

Are storage areas cleaned between loads of feed? Y N

**Water**

What type of waterers do the pigs have access to? \_\_\_\_\_

How many waterers of each type are in each pen-pasture? \_\_\_\_\_

How often are waterers checked? \_\_\_\_\_

How often are waterers cleaned? \_\_\_\_\_

Are waterers disinfected? Y N

If yes, what is used? \_\_\_\_\_

Are any water filtration/purification systems used? Y N

If yes, please list: \_\_\_\_\_

What is the primary water source for the farm? \_\_\_\_\_

Is an emergency or backup water source available? Y    N  
(e.g. 2<sup>nd</sup> well, local water company, neighboring farms, etc.)

At what age are piglets weaned? \_\_\_\_\_

Are piglets provided starter or creep feed? Y    N

If yes, at what age? \_\_\_\_\_

**3) BODY CONDITION SCORING**

Are animals body condition scored? Y    N

If yes: **When?** \_\_\_\_\_

**By whom?** \_\_\_\_\_

**What scoring system is used?** \_\_\_\_\_

**4) FACILITIES**

Describe your housing and pen/corral/pasture facilities:

Number			
Size			
Stocking rate			
Type			
Flooring			
Manure system			

Describe any animal handling aides used (chutes, restraint systems, handling aids, etc.).

When animals are housed indoors, what ventilation system is used?

Where do sows farrow? \_\_\_\_\_

How often are sows checked during farrowing season? \_\_\_\_\_

Is protection for all animals provided during inclement weather?  
(extreme temperatures, storms) Y    N

If yes, describe

If animals are housed outdoors, is protection from predators  
(dogs, coyotes, etc.) provided? Y    N

How **and** where are boars housed? \_\_\_\_\_

\_\_\_\_\_

**Cleaning and Disinfection Policy**

List compound, products and methods used on farm to clean or disinfect:

\_\_\_\_\_

\_\_\_\_\_

**Buildings and Equipment:** *(List Cleaning/Disinfecting Procedures skip if not applicable)*

**Buildings**

- preparation
- cleaning method
- disinfection
- resting (drying)
- drains

**Outdoor Facilities**

- preparation
- cleaning method
- disinfection
- resting (drying)
- drains

**Equipment**

- preparation

cleaning method  
 disinfection  
 resting (drying)

**5) WASTE MANAGEMENT POLICY**

a. Are pens/corrals scraped? Y    N

b. How is manure disposed of (*circle as appropriate*):

composting                      spread on land: (how much acreage is available?) \_\_\_\_\_  
 lagoon                              other: \_\_\_\_\_

c. How is medical waste (needles, scalpel blades, medicine containers, syringes, etc.) disposed of?

\_\_\_\_\_

Are sharps containers used? Y    N

\*(Sharps containers may include a leak-proof, puncture resistant container, such as empty coffee tin, or similar)

**6) PEST CONTROL POLICY**

*Indicate methods/products used to control rodents, birds and flies*

**a. Rodents**

traps	Y	N
bait	Y	N
limit access	Y	N
covered feed storage	Y	N

**b. Birds**

bait	Y	N
nets	Y	N
covered feed storage	Y	N
noise or visual deterrents	Y	N

**c. Flies**

bait	Y	N
environmental control (e.g. frequent cleaning)	Y	N

ear tags

Y N

other: \_\_\_\_\_

**7) ANIMAL HEALTH PROCEDURES**

***Vaccination Program***

**Piglets** (Defined as prior to weaning)

Age	Vaccinating for	Age	Vaccinating for

**Nursery Pigs** (Defined as 28 days-8 weeks)

Age	Vaccinating for	Age	Vaccinating for

**Grow/Finishing Pigs** (Defined as 8 weeks to 250 lbs.)

Age	Vaccinating for	Age	Vaccinating for

**Sows/Boars** (Defined as > 250 lbs.)

Age	Vaccinating for	Age	Vaccinating for

***De-Worming Program***

**Piglets** (Defined as prior to weaning)

Age	Parasite/Application	Age	Parasite/Application

**Nursery Pigs** (Defined as 28 days-8 weeks)

Age	Parasite/Application	Age	Parasite/Application

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**Grow/Finishing Pigs** (Defined as 8 weeks to 250 lbs.)

Age	Parasite/Application	Age	Parasite/Application

**Sows/Boars** (Defined as > 250 lbs.)

Age	Parasite/Application	Age	Parasite/Application

**External Parasite Control Program**

**Piglets** (Defined as prior to weaning)

Age	Parasite/Application	Age	Parasite/Application

**Nursery Pigs** (Defined as 28 days-8 weeks)

Age	Parasite/Application	Age	Parasite/Application

**Grow/Finishing Pigs** (Defined as 8 weeks to 250 lbs.)

Age	Parasite/Application	Age	Parasite/Application

**Sows/Boars** (Defined as > 250 lbs.)

Age	Parasite/Application	Age	Parasite/Application

**Foot Care**

Frequency of foot trimming for adult swine: \_\_\_\_\_



**Management Procedures**

<u>Procedure</u>	<u>Age</u>	<u>Method</u>
<u>Needle teeth clipping</u>		
<u>Castration</u>		
<u>Tail Docking</u>		
<u>Animal marking</u>		

Describe the management of orphan piglets: \_\_\_\_\_

**Animal handling and identification**

Types of handling aids used: \_\_\_\_\_

How are individual animals identified? \_\_\_\_\_

**8) CASUALTY STOCK POLICY**

**a. Emergency Euthanasia Plan (by age group)**

Emergency name and phone number: \_\_\_\_\_

Rendering or disposal service: \_\_\_\_\_

<b>EUTHANASIA METHODS</b>		
<b>Stage of production</b>	<b>Euthanasia Method of Choice</b>	<b>Alternative Euthanasia Method</b>
Pre-weaning		
nursery		
Grower/finisher		
Breeding swine		

<b>INDIVIDUAL TRAINED AND APPROVED TO PERFORM EUTHANASIA ON FARM</b>		
<b>Name</b>	<b>Trained and Approved By</b>	<b>Date</b>



The following information **must be available** on farm. Examples of forms can be found on the HFAC website ([www.certifiedhumane.org](http://www.certifiedhumane.org))

	Are records available?	
Animal deaths and causes	Y	N
Medication records (reason for Rx, drug used)	Y	N
Quarantine records of incoming swine	Y	N
Record of feedstuff used (see Section 2 Herd Nutrition Plan)	Y	N
Equipment and maintenance checks	Y	N
Any special training for staff	Y	N
Record of stocking rates and pen/pasture sizes	Y	N
Record of actions taken on complaints about the operation's compliance with HFAC standards	Y	N

**11) STOCKPERSON COMPETENCY TRAINING**

*List any personnel who perform routine management procedures*

<u>Procedure</u>	<u>Performed by</u>	<u>Type of training</u>	<u>Trained by</u>	<u>Training Date</u>
<u>Needle teeth clipping</u>				
<u>Castration</u>				
<u>Tail Docking</u>				
<u>Animal marking</u>				
<u>Foot trimming</u>				
<u>Injections</u>				
<u>Husbandry or handling</u>				

## PRODUCER AGREEMENTS

I/we \_\_\_\_\_, the duly authorized representative(s) of the operation described in this application, hereby affirm that all information supplied in this document and any attachments is true and accurate.

I affirm that I have read and understood the Humane Farm Animal Care (HFAC) standards applicable to my operation. I affirm my commitment to abide the HFAC certification polices, procedures and standards. No prohibited products or practices have been used, applied, or otherwise allowed to compromise the integrity of the products sold by me. I understand that failure to comply with the standards or giving false information may result in revocation of the certification of my operation.

I understand that the operation will be inspected annually and may also be subject to unannounced inspection and/or sampling for residues at any time. If the operation is a member of a Producer Group, I understand that the Internal Control System of the Producer Group will inspect the operation at least annually and that Humane Farm Animal Care may also conduct inspections of the operation. I agree to report any significant changes to the Farm Questionnaire to HFAC and to supply any information needed for evaluation of products to be certified.

I understand that submission of this application does not guarantee or imply certification. I give permission for HFAC, staff, committee members or field inspectors to visit my farm and examine fields, buildings, animals, files, documents and records, including but not limited to financial data and tax returns. I understand and agree that no HFAC staff member, board member, committee member, inspector, consultant, subcontractor, or volunteer shall be held liable or responsible for any amount in excess of the certification fees paid. I give my permission for HFAC to use subcontractors to perform tasks released to the process of certification.

I give permission for HFAC to release information from my file to other recognized certification organizations for purposes of document review. I understand that HFAC will obtain confidentiality statement from the requesting certifier before releasing any information.

All information provided in this application will be held in strict confidence and will be used by the inspector, office staff and certification committee members for certification purposed only. The above individuals have disclosed potential conflicts of interest and are bound by confidentiality agreements. HFAC has my permission to obtain information, documents, or materials related to certification, suspension of certification, or revocation of certification from other certifiers.

\_\_\_\_\_  
*Signature Authorized Representative of the Producer*

\_\_\_\_\_  
*Date*

**ALL ATTACHMENTS, INCLUDING DIAGRAM AND UNIVERSAL APPLICATION, ARE REQUIRED WITH SUBMISSION OF APPLICATION. FAILURE TO PROVIDE THIS INFORMATION MAY CAUSE DELAY IN SCHEDULING YOUR INSPECTION.**

# Application Instructions

1. **Complete** both the **Universal Application** and the attached **Application**.
  - a. *Applications are to be completed in their ENTIRETY.*
2. **Submit** the two **applications**
3. **Submit a diagram** of the facilities on a separate piece of paper that includes:
  - i. Dimensions of each building
  - ii. Equipment used (feeders, drinkers, etc.)
  - iii. Target air quality/temperature parameters
  - iv. Information about outdoor access, if applicable to your operation
4. **Submit** the Application Fee of \$75.00 to Humane Farm Animal Care.
  - a. [email the application fee]
  - b. Mail to Humane Farm Animal Care, P.O. Box 82, Middleburg, VA 20118

*Completion of the Application provides HFAC an overview of your facility and management, so it is important that you do your best to **fill out the entire application**. A thoroughly completed application will:*

1. **Avoid delays** in your certification.
2. **Reduce** the amount of time taken to conduct an **inspection**.

## **BEFORE YOU PROCEED**

**At the inspection, you must be prepared to show the HFAC Inspector the following at his/her visit to the Unit:**

- Death/mortality records and reasons for mortality (when known)
- Culling records and reasons for culling
- Medicine records retained for 1 year (including reason for use, drug used, and withdrawal/safe sale date)
- Stocking rates
- Feed and feed ingredient records for previous year
- Movement records (bought and sold dates)
- Production data
- Record of vital automatic equipment maintenance checks
- List of routine farm maintenance checks
- Training and/or experience of all staff involved in the livestock enterprises
- Demonstrate safe, hygienic, well-maintained buildings/environment, handling equipment and automatic equipment.
- Emergency contacts
- Record of actions taken on complaints about the operation's compliance with HFAC standards