



Load Out Report

Ship Date:	Farm Name:
Farm Representative:	Catching Contractor:
Contact Email:	Lead Catching Supervisor:
Contact Phone:	Start Time:

PRIOR TO LOADING

Producer Responsibilities Barn doors unlocked: <input type="checkbox"/> yes <input type="checkbox"/> no Feed & water lines raised: <input type="checkbox"/> yes <input type="checkbox"/> no Temperature & ventilation adjusted: <input type="checkbox"/> yes <input type="checkbox"/> no Barn lighting adjusted: <input type="checkbox"/> yes <input type="checkbox"/> no Notify catchers of abnormalities <input type="checkbox"/> yes <input type="checkbox"/> N/A	Comments: _____ _____ _____ _____
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Lead Supervisor Responsibilities Ensure catchers are trained: <input type="checkbox"/> yes <input type="checkbox"/> no Training records available: <input type="checkbox"/> yes <input type="checkbox"/> no Catching SOP's available: <input type="checkbox"/> yes <input type="checkbox"/> no Notify farmer of abnormalities: <input type="checkbox"/> yes <input type="checkbox"/> N/A	Comments: _____ _____ _____ _____
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Farm Review Yard conditions facilitate loading: <input type="checkbox"/> yes <input type="checkbox"/> no Washroom facilities available: <input type="checkbox"/> yes <input type="checkbox"/> no Loading area: <input type="checkbox"/> smooth <input type="checkbox"/> rough <input type="checkbox"/> other Confirm barns/floors being shipped:	Comments: _____ _____ _____ _____
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Names of Catchers:		

Transfer of Care Discussed health and condition of flock: <input type="checkbox"/> yes <input type="checkbox"/> no Are birds ready to be loaded and shipped? <input type="checkbox"/> yes <input type="checkbox"/> no	Comments: _____ _____
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Farm Representative Signature: _____
Lead Supervisor Signature: _____

These completed forms must be submitted to the grower and processor within three (3) days of shipment.

Email: _____

