

# 5-Step Animal Welfare Rating Standards Program

## Application: MEAT SHEEP COLLECTION POINTS



Please fill in this 4-page application as completely and accurately as possible. Incomplete applications will be returned and delay audit scheduling.

### COLLECTION POINT CONTACT INFO:

Name of Collection Point			
Contact Person(s)			
Position(s)			
Mailing Address (street, city, state/ province, zip/postal, country)			
Contact Information	Email	Tel	
Preferred Method of Contact	<input type="checkbox"/> Email <input type="checkbox"/> Tel		
Name of supplier/producer group/coop/marketing arm that the collection point is affiliated with, if any.			

### CURRENT AND PAST CERTIFICATES:

Does the collection point hold a <u>current</u> GAP certificate?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	If YES	Issued by	<input type="checkbox"/> AUS-MEAT	<input type="checkbox"/> EarthClaims	<input type="checkbox"/> IMI Global
				Certificate #		Expires on	
				Step-rating			
Has the collection point ever held a GAP certificate <u>in the past</u> ?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	If YES	Issued by	<input type="checkbox"/> AUS-MEAT	<input type="checkbox"/> EarthClaims	<input type="checkbox"/> IMI Global
				Certificate #			
				Step-rating			
Has the collection point ever had a GAP audit where it wasn't certified?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	If YES	Issued by	<input type="checkbox"/> AUS-MEAT	<input type="checkbox"/> EarthClaims	<input type="checkbox"/> IMI Global
				Date of audit			
				Reason for no certification:			

### SUBMITTED BY:

By the Collection Point. *Please go to Signature section.*

By a Designated Representative (affiliated with a supplier). If so, please complete the following:

Contact Person(s)			
Position(s)			
Contact Information	Email	Tel	
Preferred Method of Contact	<input type="checkbox"/> Email <input type="checkbox"/> Tel		

### SIGNATURE:

You represent and acknowledge that all information on this 4-page application herein is accurate. Regardless of who signs this document, the owner of the operation is responsible for accuracy and content of this application.

Printed Name			
Signature*		Date	

\* If the applicant uses the signature wizard on this fillable form, please use a digital image of your signature to 'sign' the document.

**COLLECTION POINT LOCATION:**

List ALL locations that are part of the collection point

Site	Physical Address (street, city, state/ province, zip/postal, country)	Distance from Site 1 (miles)
1		
2		
3		

How many sheep farms use the collection point in a year?	
How many sheep suppliers/producer groups/coops/marketing arms use the collection point?	

The collection point is staffed on:	<input type="checkbox"/> Sun	<input type="checkbox"/> Mon	<input type="checkbox"/> Tues	<input type="checkbox"/> Wed	<input type="checkbox"/> Thurs	<input type="checkbox"/> Fri	<input type="checkbox"/> Sat
The collection point handles:	<input type="checkbox"/> goats	<input type="checkbox"/> cattle	<input type="checkbox"/> sheep	<input type="checkbox"/> pigs	<input type="checkbox"/> other: _____		
The collection point is used for <b>GAP</b> sheep on:	<input type="checkbox"/> Sun	<input type="checkbox"/> Mon	<input type="checkbox"/> Tues	<input type="checkbox"/> Wed	<input type="checkbox"/> Thurs	<input type="checkbox"/> Fri	<input type="checkbox"/> Sat

**ANIMAL CAPACITY:**

*Site numbers below are linked to table above*

Site	Total # of Sheep	The maximum daily capacity for GAP market ready sheep at the collection point is:	What % of animals coming through your system will be Step-rated?
1			<input type="checkbox"/> 100%
2			<input type="checkbox"/> 75-99%
3			<input type="checkbox"/> 50-74%
			<input type="checkbox"/> 25-49%
			<input type="checkbox"/> 0-24%

On average, sheep stay at the collection point for:	<input type="checkbox"/> less than 1 hour <input type="checkbox"/> less than 4 hours <input type="checkbox"/> less than 8 hours <input type="checkbox"/> other: _____
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**COLLECTION POINT DETAILS:**

How many pens are there?	
What is the capacity of each pen?	
What are the pen dimensions (on average)?	_____ x _____ <input type="checkbox"/> ft <input type="checkbox"/> m
Pens are:	<input type="checkbox"/> used multiple times a day <input type="checkbox"/> used once a day

**For each of the following questions, please answer by checking the appropriate box. All questions must be answered for your application to be processed.**

**Your answers should reflect the collection point current situation or practice.**

A) GENERAL		YES	NO
1	Has the collection point's owner read Global Animal Partnership's Animal Welfare Rating Pilot Standards for Meat Sheep Collection Points v1.0?		
2	Does the collection point hold any other certifications that conflict with the Collection Point standards and requirements? <b>If YES</b> Please provide details:		
3	Are there any laws or regulations (local, state, provincial, federal) that prohibit adherence to any of the GAP standards? <b>If YES</b> Please provide the Standard number and additional details:		

B) PLANS, PROTOCOLS & RECORDS		YES	NO
<b>DOES THE COLLECTION POINT:</b>			
3	Have a written protocol outlining how Step-rated animals are segregated from non-Step-rated animals?		
4	Have a training program that includes animal handling and management?		
5	Keep the following chain of custody records for each shipment of sheep? <i>Check all that apply:</i> <input type="checkbox"/> name of the operation <input type="checkbox"/> head count <input type="checkbox"/> Step-rating of the operation <input type="checkbox"/> departure and arrival times <input type="checkbox"/> DOAs <input type="checkbox"/> I don't have chain of custody records		

C) ANIMAL CONDITION		YES	NO
<b>DOES THE COLLECTION POINT:</b>			
6	Have protocols for animals that are sick/injured/lame/poor body condition/non-ambulatory when they <b>arrive</b> at the collection point?		
7	Have protocols for animals that get sick/injured/lame/non-ambulatory <b>during their time</b> at the collection point?		
8	Use the following method(s) to euthanize sheep ( <i>check all that apply</i> ): <input type="checkbox"/> gunshot <input type="checkbox"/> penetrating captive bolt <input type="checkbox"/> non-penetrating captive bolt <input type="checkbox"/> anesthetic overdose <input type="checkbox"/> blunt force trauma <input type="checkbox"/> other: _____		

D) ANIMAL CARE & MANAGEMENT		YES	NO
9	How frequently are sheep checked? <input type="checkbox"/> once a day <input type="checkbox"/> twice a day <input type="checkbox"/> every couple of hours <input type="checkbox"/> other: _____		
10	Are electric prods ever used to handle/load/unload sheep?		

D) ANIMAL CARE & MANAGEMENT <i>Continued</i>		YES	NO
11	Does the collection point/assembly yard provide the following? <i>Check all that apply:</i> <input type="checkbox"/> bedding <input type="checkbox"/> shade/shelter <input type="checkbox"/> fans <input type="checkbox"/> windbreaks <input type="checkbox"/> other: _____ <input type="checkbox"/> no, none of the above		

E) FEED & WATER			YES	NO
12	Are sheep held overnight?			
	<b>If YES</b>	Are they fed? <input type="checkbox"/> yes, they are given _____ <input type="checkbox"/> no		
	<b>If YES</b>	Does the feed contain any animal (mammal, avian or fish) by-product or waste? <input type="checkbox"/> yes <input type="checkbox"/> no		
13	Is drinking water provided at all times?			

F) NEXT DESTINATION				
14	Where are GAP sheep transported to next? Please provide the name & address of <u>all</u> destinations of sheep. <i>NOTE: if multiple destinations, please attach information in a separate attachment</i>			
	<b>Where are sheep transported to?</b> <input type="checkbox"/> directly to processor <input type="checkbox"/> another operation <input type="checkbox"/> sale or auction barn <input type="checkbox"/> other: _____	<b>Destination Information</b>  name / city / state		<b>Average time from your location to next destination?</b>  Time (h)

**Please submit this completed application to your preferred GAP-approved certification company for review.**