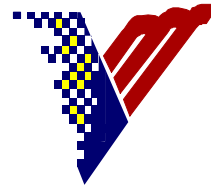




DEPARTMENT OF VETERINARY SERVICES
 MINISTRY OF AGRICULTURE AND AGRO-BASED INDUSTRY
 WISMA TANI, BLOCK PODIUM 4G1, PRECINCT 4,
 FEDERAL GOVERNMENT ADMINISTRATIVE CENTRE
 62630 PUTRAJAYA,
 MALAYSIA



Tel: 03-8870 2000

Fax: 03-8888 6472, 03 – 8888 8685(KP)

e-mail: webmaster@jph.gov.my

FARM PROFILE

(To be filled by Farm Veterinarian/Owner/
 Animal Production Specialist)

1. PARTICULARS OF OPERATOR

Name	Company	Farm
	Address	
Post Code		
State		
Phone		
Fax		
E-mail		
Website		
GPS Reading		

2. CATEGORY OF FARMER

Category	Please tick (/)
Individual entrepreneur	
Company-owned/Cooperatives	
Government Statutory Body (e.g RISDA, FELCRA, PORIM)	
Privately Owned Company	
Others (please specify)	

3. LAND OWNERSHIP

Private Land	Hectares	State Land	Hectares	Statutory Bodies	Hectares	Unknown
Owner		Leasehold		Leasehold		
Tenant		Sub-tenant		Sub-tenant		
Squatter		Squatter		Squatter		

4. MAN-POWER

	Number of staff	Health record [Please tick (/)]	Training record [Please tick (/)]
Management			
Supervisory			
Veterinarians			
Clerical			
Laborer			
Others			

5. PRODUCTION PER YEAR (ESTIMATED)

	Live Animal (heads) and Milk (litres) Production	
Output	Breeding :	heads
	Slaughter :	heads
	Liquid Milk:	Litre or kg

6. STANDING BREEDER POPULATION

Breed	Source	Date of Arrival	No. of Female Breeder	No. of Male Breeder	Total Stock To-Date

7. STANDING POPULATION OF REPLACEMENT MALE AND FEMALE BREEDERS

BREED	SOURCE	NUMBER OF REPLACEMENT FEMALE BREEDERS	NUMBER OF REPLACEMENT MALE BREEDERS	TOTAL

8. HOUSE BUILT IN THE FARM (INCLUDE PROPOSED)

House Code	Year Built	Length (m)	Width (m)	Height (m)	Number of adult breeder	Floor space	Floor system	Compass direction	Roof angle pitch	Roof Materiall

9. TYPE OF HOUSING (Please tick (/))

Open house system

Single House on ground

Single house on stilts with concrete basement

Single house on stilts with no concrete basement

Others (please specify) _____

Floor system

Completely slatted

Concrete flooring

Others (please specify) _____

Drainage system

Gutter/drain available around the shed

Pool for drained water

Others (please specify) _____

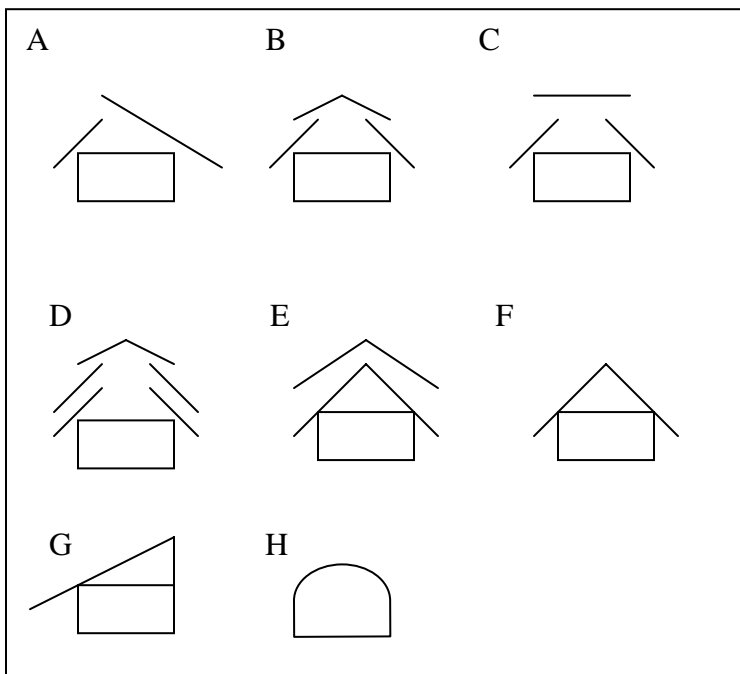
Roof Angle Pitch

(Please circle the abbreviation where appropriate)

Roof Material

(Please circle the abbreviation where appropriate)

- | | |
|------------|----|
| Attap | AT |
| Asbestos | AB |
| Aluminium | AL |
| Corr. Zinc | ZN |
| Canvas | CS |



10. WATER AND ELECTRICITY SUPPLY (Please tick (/))

Electricity	TNB	
	Own	
	Others	
	Nil	

Water	Own –Sourcing	Open Pond (external use only)	
		Underground (treated at least twice per year)	
		Underground (untreated)	
	JBA		

11. SOURCE AND STORAGE OF FEED [Please tick (/) wherever applicable]

SOURCE OF FEED		Practised GMP	Non - GMP
Commercial Feed (Name of supplier)	1.		
	2.		
	3.		
Self-mixed feed			
Others (please specify) e.g. OPF, silage, pastures, mineral supplements,etc.			
Storage of feed	Rodent and bird proof		
	Slatted platform available		

12. MANAGEMENT SYSTEM (Please tick (/))

Rearing system	Fully - intensive	
	Semi - intensive	
Feeding system	Manual	
	Mechanised	
	Both	
Type of drinkers used	Trough	
	Nipple	
	Others (please specify)	
Feeding regime	<i>Type of feed</i>	
	Commercially prepared	
	Own prepared feed	
	Both own & commercial	
	Pasture (Cut & Carry)	
	Oil-palm frond (chopped/whole)	
	Silage (specify type)	
	Mineral supplements	

13. HERD PERFORMANCE

Parameters	Unit
Age of female for breeding	Day
Age of male for breeding	Day
Age of female at first kidding/lambing	Day
Kidding/Lambing rate	%
Kidding/Lambing interval	Day
Twinning percentage	%
Weigh of Male Kid at birth	Kg
Weigh of Male Kid at weaning	Kg
Average Weigh of Male at Marketing Age	Kg
Marketing Age Male (Average)	Day
Kid/Lamb mortality	%

Mortality Male To (Marketing Age)			%
Mortality of female breeders			%
Herd mortality			%
Male to Female Breeding Ratio			
Average Feed Consumption	Meat Male	Day old to 180 days	Kg
	Separate Sex Rearing (for breeders only)	Average Male	Kg
		Average Female	kg
Milching Performance (Average)			
Production weeks			Weeks
Total milk collected			kg or Lit
Price per litre(Kg)			RM

14. AVERAGE MONTHLY SALESABLE MALE MEAT GOAT/SHEEP

Month	No. of meat goat male sold (above 6 month old)	No. of meat sheep male sold (above 6 month old)	Total weight		Remarks (RM)
			Goat	Sheep	
January					
February					
March					
April					
May					
June					
July					
August					
September					
October					
November					
December					

15. BIOSECURITY

i. Fencing (Please tick (/))

Perimeter Fencing	Complete	
	Partial	
Type of Perimeter Fencing	Chain link with 6" concrete along the base	
	Chain link without concrete at the base	
	Chain link with barbed wires at the base	
	Chain Link alone	
	Other than chain link (please specify)	

ii. Disinfection (Please tick (/))

Vehicle	Manual Spray	
	Manual high pressure spray	
	Open wheel-dip	
	Covered wheel-dip	
Footbath to the production unit	Randomly place	
	Entrance to every house	

iii. Provision of Working Uniform (Please tick (/))

	Staff	Visitor
Boot / Footwear		
Uniform		

16. TYPE OF DISINFECTIONS AND SANITISERS USED

	Type of Disinfectant	Concentration used
Sheds - when empty		
Sheds – with animals		
Equipment		
Foot Bath		
Vehicles spray		
Water		

17. VACCINATION PROGRAMMES

Disease/Vaccine	Age of Animals					Method of application	Remarks

18. DISEASE : FOR ALL OUTBREAK OF DISEASES IN FARM - PAST ONE YEAR

Disease	No. of animals affected	Total mortality

19. MEDICATION

- i. Routine drugs normally **used** against stress/disease prevention including drugs used in feed and water

Type of drug	Age administered	Duration (in days)	Purpose for usage	Withdrawal period	Supplier

- ii. Type of drugs normally **stored** in farm/used for specific disease control -other those in (i)

Type of drug	Purpose of usage	Withdrawal period	Remark

20. SERVICES AND ADVICES ON FARM MATTERS

i. Farm Veterinarian

Yes Permanently Employed

No Ad – hoc basis

ii. Other Source of services and Advices

JPH

Private Sector :

Feedmills

Vaccine Company

Drug Company

Others(specify)

21. DISEASE MONITORING PROGRAMME

i. Frequency of Sampling

Type of Sample	Frequency of Sampling		
	Monthly	Ad-hoc	Others(specify)
Whole blood/serum			
Soils			
Environmental sampling on goat/sheep sheds			
Feeds			
Water Source			

ii. Post Mortem (Please tick (/))

a. Done on all dead animals

Done on Ad – hoc basis

b. Post Mortem findings
(Please attach reports on significant findings)

Month	No. of animal	Samples submitted to the Lab	Lab findings/ results

iii. Monitoring of Meliodiosis and Brucellosis.
(please attach copy of records)

Date / Month	Result (Positive or Negative)	
	Meliodiosis	Brucellosis

iv. Monitoring of wild dogs and other animals on farm premis
(please attach copy of records)

Type of animals seen	(Please tick (/))
Stray dogs	
Wild pigs	
Monitor Lizards	
Migratory birds	
Others (specify)	

22. DISPOSAL OF DEAD CARCASS AND MANURE.

i. Dead Animal (Carcass) (Please tick (/))

Incinerator	Burn	Pit	Bury	Others(specify)

ii. Manure (Please tick (/))

CSW	CNDS	CMDS	CBDS

- Note:** CWS - Collect, sell (wet)
 CNDS - Collect, naturally dried and sell
 CMDS - Collect, mechanically dries and sell
 CBDS - Collect, biologically dried and sell

iii. Frequency of Manure Disposal From Each Shed (Please tick (/))

Every week	Every Two Weeks	End of Every Production Cycle	Others (specify)

iv. Pollution control facilities to reduce flies/odour /dust/noise

Facility	Please tick (/)
Trees / Plants	
Waste water retention pond	
None	
Others (please specify).....	

Applicant Signature :

Full Name :

IC/Pasport No. :

Date :

Company Official Stamp:

Checked and Verified by,

.....
(Registered Veterinarian)

Name :

Registration No. :

Note: Please attach:-

No.	Attachments	Please tick (/)
i	<i>Farm Layout plan</i>	
ii	<i>Copies of Records</i>	
iii	<i>Vaccination records</i>	
iv	<i>Medication records</i>	
v	<i>Disease screening and monitoring programme</i>	
vi	<i>Fly control programme</i>	
vii	<i>License for rearing goat/sheep(if applicable)</i>	