

## Audit details

Audited location			
Additional location details, e.g. coordinator, identification number etc.			
Name of the respondent (contact)			
Program audit			
Confirmation audit		Additional audit	
Stock check			
Special audit			
Parallel audit			
Date of audit (from)		Date of audit (until)	
Start of audit (hh:mm)		End of audit (hh:mm)	
Audit duration (hh:mm)			
Combined audit (norm/standard/program)			
Certification body			
Last name, first name of auditor			
General K.O.		Remark general K.O.	
Comments			
<b>Preliminary audit result</b>		<b>Number of corrective actions</b>	

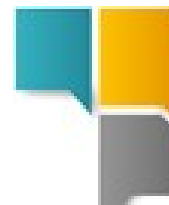
\_\_\_\_\_  
Place, date

\_\_\_\_\_  
Signature/s auditor/s

I hereby confirm the data concerning the company and the audit. I have received a copy of the audit report and the action plan.

\_\_\_\_\_  
Place, date

\_\_\_\_\_  
Signature responsible person

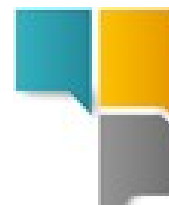


### Company details - Broiler production

Name of company	
Street and house number	
Postal code, town and country	
Telephone/fax number	
Email address	
Address of sty/coop (if different from mailing address)	
Location number (VVVO no.)	
Registered production scope no.	
Identification number	
Name of person responsible	
Name of coordinator	

### Scope - Broiler production

Production scope		Kg live weight			
<b>3001</b>	<b>Broiler production</b>				
Period audited		from	DD.MM.YYYY	until	DD.MM.YYYY
<b>Quantity report: Random check of the report correct?</b>		<b>Yes</b>		Remark quantity report:	
		<b>No</b>			



### Additional contact persons and details on the availability

#### Contact person location

Contact person location	
Telephone (best reachable)	
Additional telephone number	
Remark (availability)	

#### Deputy contact person location

Deputy contact person location	
Telephone	
Mobile	
Remark (availability)	

#### Additional information about the location

Remark location	
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Company: \_\_\_\_\_

Date: \_\_\_\_\_

No.	Criterion/ Requirement	A	C	KO	E	Comments
* = For this requirement the evidence or measurement tool used for evaluation of compliance with the animal welfare requirement must be documented, regardless of the outcome of the assessment.						
If criteria are rated C, measures must be initiated. These are to be recorded in the corrective action report.						
1	Requirements broiler production					
1.1	Basic criteria for livestock production, hygiene, animal health					
1.1.1	Monitoring and care of livestock* (KM)					
1.1.2	General farming requirements* (KM)					
1.1.3	Correct handling of ill and injured poultry* (KM)					
1.1.4	Shed floor* (KM)					
1.1.5	Shed climate, temperature, noise pollution, ventilation* (KM)					
1.1.6	Lighting* (KM)					
1.1.7	Alarm system* (KM)					
1.1.8	Feed supply* (KM)					
1.1.9	Hygiene of feeding facilities* (KM)					
1.1.10	Storage of feeds* (KM)					
1.1.11	Water supply* (KM)					

No.	Criterion/ Requirement	A	C	KO	E	Comments
1.1.12	Hygiene of drinking facilities* (KM)					
1.1.13	Buildings and equipment* (KM)					
1.1.14	Hygiene on the farm* (KM)					
1.1.15	Handling litter, dung and feed leftovers* (KM)					
1.1.16	Carcass storage and pick-up* (KM)					
1.1.17	Pest monitoring and control (KM)					
1.1.18	Cleaning and disinfection measures* (KM)					
1.2	Origin and Marketing: Procurement of day-old-chicks*					
1.3	Monitoring and Care of Livestock: Measures to improve foot pad health*					
1.4	Handling of livestock when loading: Instructions for preliminary destocking (only for broilers)*					
1.5	Proof of proficiency of the livestock farmer: Proof of annual training of livestock farmer*					
1.6	Documentation of results from the slaughtering process: Participation in animal welfare control plan*					
1.7	Additional activity options*					
1.8	Bigger space allowances*					
1.9	Shed climate check*					
1.10	Drinking water check*					

Location: \_\_\_\_\_

Date: \_\_\_\_\_

Nr.	Evaluation	Nonconformity	Corrective actions	Deadline