

Site Visit Form

Date	Facility Visited

Animal Health and Husbandry	Satisfactory	Not Satisfactory	Comment
Animal health and behaviour	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Animal ID method	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Housing method and condition	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Feed and water quality	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Provision of environment enrichment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments: 			

Records	Satisfactory	Not Satisfactory	Comment
Animal health records	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Animal procurement records	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Records of animal use	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Record of drug/medication use	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments: 			



State of Facility	Satisfactory	Not Satisfactory	Comment
State of the facility	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Appropriate handling equipment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sanitation and vermin control	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments:			

Biohazard and Occupational Health and Safety	Satisfactory	Not Satisfactory	Comment
Biological waste disposal	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Attention to occupational health and safety	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Attention of biosafety	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments:			

Facility Manager
Name:

Persons present during visit

Name:	Signature:
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