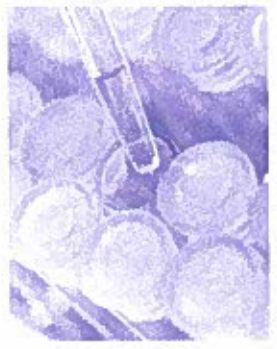
Department of
Agriculture, Food and the Marine
An Roinn
Talmhaíochta, Bia agus Mara

If you need assistance in completing this application form please phone the NGP help-line on

053 9163437



When completed please return this application form to National Genotype Programme (NGP), Department of Agriculture Food and the Marine, TSE Section, Johnstown Castle Estate, Wexford, Co. Wexford Y35 PN52

NGP

National Genotype Programme (NGP) Application Form

Section A Flockowner Details

Name:

Address:

Herd / Flock No:

Phone No:

Email address:

Name of Lab:

Section B Veterinary Surgeon / Practice Details

Name:

Address:

Phone No:

Email address:

Department Business Identification Number:

Section C Flock Details

Size of Flock:

Number of Stock Rams:

Sheep Breed(s):

Are you a member of a Breed Society (Please tick appropriate box) Yes ☐ No ☐

Breed Society Name and Membership Number:

Name: Number:

Name: Number:

Name: Number:

Is your flock fully NSIS compliant? (i.e. animals tagged, flock register up to date, etc.) (Please tick appropriate box) Yes ☐ No ☐

Are you a participant in the Scrapie Monitored Flock Scheme? (Please tick appropriate box) Yes ☐ No ☐

Do you wish to join the Flock Genotype Programme? (Please tick appropriate box) Yes ☐ No ☐

Have sheep from your flock been genotyped previously? (Please tick appropriate box. If yes enclose certificates) Yes ☐ No ☐

Number of Sheep to be genotyped?

Section D Sheep Details

Please list the individual identification numbers from the **left ear tag** and where appropriate the **right ear tag** of the sheep to be genotyped. **You must include individual Check Letter.**

Applicants own herd/flock number

	LEFT EAR TAG NUMBER	RIGHT EAR TAG NUMBER	BREED	PEDIGREE/PUREBRED IDENTIFIER	YEAR OF BIRTH	GENDER
A						
B						
C						
D						
E						
F						
G						
H						

Section E DECLARATION BY FLOCKOWNER

I declare that all the particulars stated on this form are true and correct to the best of my knowledge. I also understand that the data collected for the National Genotype Programme/Survey will be used and disclosed in specified circumstances consistent with the purpose of the programme/survey.

Signature: Date:

Please return to: National Genotype Programme (NGP),
Department of Agriculture Food and the Marine, TSE Section, Johnstown Castle Estate, Wexford, Co. Wexford Y35 PN52