##### Heightened Biosecurity Visitor Questionnaire Form

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of Visit: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Reason for Visit: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (Circle one)

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| --- | --- |
| 1. Can your visit be postponed?  | Yes or No |
| 2. Can your business be conducted off-site or via telephone?  | Yes or No |
| 3. Does your visit require viewing or handling the animals at this facility?  | Yes or No |
| 4. Have you traveled to the “outbreak area” recently? * If yes, did you visit a farm or feedyard or have animal contact while there?
 | Yes or NoYes or No |
| 5. Have you had contact with livestock within the past week? * If yes, what species and when? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | Yes or No |
| 6. Will you use the protective clothing (for example, rubber boots) provided?  | Yes or No |

Visitor Signature Date

Approval Signature Date

If you answered yes to question #1 or #2, your visit may not be allowed.

If **yes** to question #3 or #4, contact with animals may not be allowed.

If you answered **yes** to question #4 and/or #5, and your visit is deemed necessary, protective clothing must be worn.