

# 5-Step Animal Welfare Rating Standards Program



Application: **TURKEY OPERATIONS**

## SECTION 1

<b>Name of Operation</b>					
<b>Contact Person(s)</b>					
<b>Position(s)</b>					
<b>Complete Address</b>	Street Address:				
	City:				
	State/Province:				
	Zip/Postal Code:		Country:		
<b>Contact Information</b>	Tel:		Cell/Mobile:		
	Email:				
<b>Preferred Method(s) of Contact</b>		<input type="checkbox"/> Tel	<input type="checkbox"/> Cell / Mobile	<input type="checkbox"/> Email	
<b>Name of any affiliated group</b> <i>(e.g., supplier, producer group, cooperative, marketing entity)</i>					
<b>Any brand names of Step-rated products</b>					

OPERATION DETAILS						
Site No.	Physical Address	City	State/Province	Zip/Postal Code	Country	Distance from Site 1 (time/miles)
1*						
2						
3						
4						
5						
6						
7						
8						
9						
10						

\* Site 1 is the home farm / main site.

If your operation has more than 10 sites, provide the information requested above for all other sites in a supplemental document.

CERTIFICATION QUESTIONS	
Has your operation previously applied for 5-Step certification <u>for turkeys</u> ?	<input type="checkbox"/> YES <input type="checkbox"/> NO
<u>If YES:</u> Did your operation achieve certification?	<input type="checkbox"/> YES <input type="checkbox"/> NO
<u>If YES:</u> What Step level did your operation achieve? <i>(tick one)</i>	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 5+
<u>If YES:</u> Which certification company issued your 5-Step certificate?	

FLOCK DETAILS					
<i>"Flock" is defined as a segregated group of turkeys, whether in a house, on a floor of a multi-level house, or in an outdoor area.</i>					
No. of Flocks Raised at One Time		Average No. of Turkeys Raised Per Flock		Typical Range in Flock Sizes	
Estimated No. of Flocks Raised Per Year			Estimated No. of Turkeys Raised Per Year		
Will <u>all</u> turkeys be raised according to the 5-Step standards?	<input type="checkbox"/> YES <input type="checkbox"/> NO, only some flocks will be raised according to the 5-Step standards				
If <u>NO</u> , what is the estimated number of turkeys raised annually according to the 5-Step standards?					

SYSTEM DETAILS	
How many barns / houses (whether permanent or mobile) are on your operation?	
In the field below, please provide the approximate dimensions of each barn / house in feet or meters. (e.g., all houses: 40 x 250 ft; Barn 1: 40 x 125 m, Barn 2: 44 x 360 m)	
Please tick each that applies to your system: <input type="checkbox"/> entire flock processed at one time <input type="checkbox"/> flocks thinned (groups of birds removed from a flock over a period of weeks) <input type="checkbox"/> turkeys raised indoors year-round <input type="checkbox"/> turkeys raised in outdoor systems <input type="checkbox"/> turkeys raised seasonally <input type="checkbox"/> turkeys raised in both indoor and outdoor systems (e.g., indoor system for year-round production <u>and</u> some flocks raised outdoors only seasonally) <input type="checkbox"/> other: _____ (describe)	
Do you raise any other animals commercially on your operation? <input type="checkbox"/> YES <input type="checkbox"/> NO	
If <u>YES</u> , please list any other species raised commercially on your operation:	

What Step level(s) are you aiming to achieve for your operation? (please tick all that apply)	
<input type="checkbox"/> <b>Step 1:</b> no cages, no crowding	<input type="checkbox"/> <b>Step 2:</b> enriched environment
<input type="checkbox"/> <b>Step 3:</b> enhanced outdoor access	<input type="checkbox"/> <b>Step 4:</b> pasture centered
<input type="checkbox"/> <b>Step 5:</b> animal centered: bred for outdoors	<input type="checkbox"/> <b>Step 5+:</b> animal centered: entire life on same farm

This box is to be completed by the certification company:	
Name of Certification Company	

## SECTION 2

**FOR EACH OF THE FOLLOWING QUESTIONS:** Your answers should reflect your operation's current situation or practices for raising turkeys intended to be marketed as Step-rated—i.e., for turkeys raised according to the 5-Step Animal Welfare Rating Pilot Standards for Turkeys. **All questions must be answered for your application to be processed.**

DOES THE OPERATION:		YES	NO
1	Have a <u>written</u> farm and animal health plan?		
2	Have a biosecurity program?		
3	Require power to operate any of the following? <i>(please tick all that apply)</i> <input type="checkbox"/> heating systems <input type="checkbox"/> cooling systems <input type="checkbox"/> ventilation systems <input type="checkbox"/> watering systems <input type="checkbox"/> feeding systems		
4	Have a training program for any turkey care-givers and/or managers?		
5	To the best of your knowledge, use genetically modified or cloned turkeys or their progeny?		
6	Choose to raise breeds of turkeys who have any of the following? <i>(please tick all that apply)</i> <input type="checkbox"/> good leg health <input type="checkbox"/> low levels of mortality <input type="checkbox"/> the ability to range <input type="checkbox"/> good immune function <input type="checkbox"/> ability to perch throughout their lives <input type="checkbox"/> low levels of behavior that causes injury <i>(e.g., feather pecking)</i>		
7	Please list what breed(s) you raise:		
8	Ever use antibiotics, ionophores, beta agonists, or sulfa drugs preventatively (such as in feed or water)? <i>(including any pre-mixes, minerals, or vitamin supplements.)</i>		
9	Have a <input type="checkbox"/> veterinarian or <input type="checkbox"/> trained animal care-giver euthanize turkeys when necessary? <i>(please tick all that apply)</i>		
10	Use the following euthanasia method(s)? <i>(please tick all that apply)</i> <input type="checkbox"/> pre-stunning <input type="checkbox"/> gas stunning and killing <input type="checkbox"/> gunshot <input type="checkbox"/> captive bolt (penetrating or non-penetrating) <input type="checkbox"/> manual cervical dislocation <input type="checkbox"/> mechanical cervical dislocation <input type="checkbox"/> anesthetic overdose <input type="checkbox"/> blunt force trauma <input type="checkbox"/> decapitation <input type="checkbox"/> other: <i>(please describe)</i>		
11	Observe and monitor each flock at least twice each day? <b>If YES</b> <input type="checkbox"/> 2 x a day <input type="checkbox"/> > 2 x each day		
12	Record daily mortality for each flock? <i>(excluding loss from predation)</i>		
13	Have policies on which turkeys to cull during daily flock monitoring?		
14	Receive poults within 48 hours of removal from the hatcher?		

<b>DOES THE OPERATION: <i>continued</i></b>		<b>YES</b>	<b>NO</b>	
15	Have any turkeys who are beak-trimmed?			
	<b>If YES, please answer the following three questions:</b>			
	What is the method?	<input type="checkbox"/> infra-red ( <i>e.g., Novatech</i> ) <input type="checkbox"/> hot blade <input type="checkbox"/> other		
		If other, please describe:		
	Where is it performed?	<input type="checkbox"/> at the hatchery <input type="checkbox"/> at the operation		
Are turkeys ever re-trimmed during the grow-out period?				
16	Have any turkeys who are toenail-conditioned?			
	<b>If YES, please answer the following three questions:</b>			
	What is the method?	<input type="checkbox"/> microwave ( <i>e.g., Novatech</i> ) <input type="checkbox"/> hot blade <input type="checkbox"/> other		
		If other, please describe:		
	Where is it performed?	<input type="checkbox"/> at the hatchery <input type="checkbox"/> at the operation		
Are turkeys ever re-conditioned?				
17	Have any turkeys who have physical alterations other than beak trimming or toenail conditioning?			
	<b>If YES</b>	Please tick all that apply:		
		<input type="checkbox"/> de-toeing / toe trimming <input type="checkbox"/> de-snooding <input type="checkbox"/> de-spurring <input type="checkbox"/> other		
If other, please describe:				
18	Use any of the following artificial devices to control feather pecking? ( <i>please tick all that apply</i> )			
	<input type="checkbox"/> goggles <input type="checkbox"/> blinkers <input type="checkbox"/> contact lenses <input type="checkbox"/> other ( <i>describe below</i> )			
19	Have a footpad dermatitis monitoring program on-site or at the plant?			
20	Conduct a 100-bird lameness evaluation for each flock the week before processing?			
21	Provide all turkeys access to drinking water at all times?			
22	Provide all turkeys access to feed at all times?			
23	Feed any mammalian, fish, or avian by-products or waste? ( <i>excluding dairy-based probiotics and including eggs</i> )			
24	Raise turkeys in cages? ( <i>excluding transport containers and fenced-in porches and outdoor enclosures that allow turkeys full range of motion</i> )			
25	Provide housing at all times that can protect turkeys from the elements and predation?			
26	Maintain floors of all houses with friable (dry and loose) litter?			
27	Have slatted and/or wire floors?			
28	Assess air quality during daily flock monitoring?			
	<b>If YES</b>	How is air quality assessed? ( <i>please tick all that apply</i> )		
		<input type="checkbox"/> sense of smell / sensory evaluation <input type="checkbox"/> calibrated meters or testing strips		
If other: ( <i>please describe</i> )				
29	Keep light levels at or above 20 lux (2 fc) during daylight hours?			

DOES THE OPERATION: <i>continued</i>		YES	NO
30	Provide periods of continuous darkness each day?		
<b>If YES</b>	Please describe your lighting schedule for each phase of the grow-out: <i>(e.g., 4 hours continuous darkness from day 3 after placement to 1 day before herding and loading)</i>		
	for males:		
	for females:		
31	Follow specific stocking density protocols?		
<b>If YES</b>	Please provide stocking densities according to final weight: <i>(e.g., 9 lb/ft<sup>2</sup>, 39 kg/m<sup>2</sup>)</i>		
	for males:		
	for females:		
32	Provide enrichments? <i>(e.g. straw bales, raised platforms, scattered grains)</i>		
<b>If YES</b>	How many different types of enrichments are provided?	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> > 2	
	What type(s) of enrichments are provided?		
	By what age are turkeys first provided with enrichments? <i>(please specify days or weeks)</i>		
33	Provide perches in housing, whether permanent or mobile?		
34	Consider rodents a problem?		
<b>If YES</b>	What rodent control method(s) do you use or contract? <i>(please tick all that apply)</i>		
	<input type="checkbox"/> glue boards <input type="checkbox"/> poison <input type="checkbox"/> drowning <input type="checkbox"/> snap traps <input type="checkbox"/> tin cats <input type="checkbox"/> cats <input type="checkbox"/> other <i>(describe below)</i>		
35	Consider predators a problem?		
<b>If YES</b>	What predator control method(s) do you use or contract? <i>(please tick all that apply)</i>		
	<input type="checkbox"/> poison <input type="checkbox"/> traps <input type="checkbox"/> snares <input type="checkbox"/> drowning <input type="checkbox"/> electric fencing <input type="checkbox"/> working/guard dogs <input type="checkbox"/> fire arms <input type="checkbox"/> other <i>(describe below)</i>		

<b>TRANSPORT: FOR ALL OPERATIONS</b>		<b>YES</b>	<b>NO</b>
36	Does your operation transport poult directly from the hatchery to your site?		
	<b>If NO</b> Are poults transported to your operation by the hatchery or an affiliated group?		
	Does the hatchery or an affiliated group transport poults from the hatchery to a delivery service location? (e.g., from the hatchery to an airport or post office for outbound delivery)		
	Does your operation transport poults from a delivery service location to your site? (e.g., picking up poults upon delivery to an airport or post office to your site)		
37	Do you ensure that poults are delivered within 48 hours of hatching?		
38	Who performs / arranges for the herding and loading of your operation's turkeys? <input type="checkbox"/> your own operation <input type="checkbox"/> crews hired by your operation <input type="checkbox"/> an affiliated group (e.g., supplier, producer group, cooperative, marketing entity)		
	If your operation hires a herding and loading crew, please list their names and telephone numbers in the field below:		
	If an affiliated group arranges the herding and loading of your flocks, please list the company name and telephone number in the field below:		
39	Are turkeys herded and loaded:		
	in low / dimmed light?		
	with mechanical loaders?		
	with conveyor belts?		
	other? (e.g., hand-caught and carried by their legs; please describe below)		
40	On average, how long does herding and loading take? (from the first turkey herded until the transport vehicle departs)		
41	Do the transport containers:		
	have wire floors?		
	allow for all turkeys to sit on the floor of the container at the same time?		
42	Do water lines in the house need to be raised prior to herding and loading?		
43	Does feed withdrawal exceed 12 hours (from withdrawal to arrival at the plant?)		
44	Are any turkeys who are left behind by the loading crews culled on the same day the rest of the flock is transported?		
45	Who transports or controls / manages transport of your operation's turkeys to the slaughter and/or processing plant? <input type="checkbox"/> your own operation <input type="checkbox"/> transporters hired by your operation <input type="checkbox"/> an affiliated group (e.g., supplier, producer group, cooperative, marketing entity)		
	If your operation hires transporters, please list their names and telephone numbers in the field below:		
	If an affiliated group controls / manages transport of your flocks, please list the company name and telephone number in the field below:		

<b>TRANSPORT: FOR ALL OPERATIONS <i>continued</i></b>		YES	NO
46	How far is the slaughter and/or processing plant from your operation? <input type="checkbox"/> > 8 hours away <input type="checkbox"/> 6 to 8 hours away <input type="checkbox"/> 4 to 6 hours away <input type="checkbox"/> < 4 hours away <input type="checkbox"/> at my operation / comes to my operation ( <i>i.e., on-farm processing</i> )		
47	Is the vehicle managed to prevent heat and cold stress during transport?		
48	Are there written procedures for the driver to follow in the case of accident or emergency during transport?		

<b>FOR OPERATIONS THAT PROVIDE OUTDOOR ACCESS</b>		YES	NO
<b>please tick this box if your operation is an exclusively indoor system: <input type="checkbox"/></b>			
49	How old are the turkeys when they are given continuous outdoor access during daylight hours? ( <i>in weeks</i> )		
50	Do all flocks have outdoor access for a minimum of 3 weeks?		
51	How much outdoor space does each turkey get? ( <i>please fill in one of the following</i> ) turkey per ft <sup>2</sup> : <input type="text"/> turkey per m <sup>2</sup> : <input type="text"/> lb per ft <sup>2</sup> : <input type="text"/> kg per m <sup>2</sup> : <input type="text"/>		
52	Is the outdoor area covered with vegetation and/or forage? <b>If YES</b> What percentage of the outdoor area is covered with vegetation and/or forage? <input type="checkbox"/> < 25% <input type="checkbox"/> ≥ 25% - 49% <input type="checkbox"/> ≥ 50% - 74% <input type="checkbox"/> ≥ 75%		
53	Do turkeys have continuous access to housing (permanent or mobile) while outdoors?		
54	Do you provide any of the following in the outdoor area(s)? ( <i>please tick all that apply</i> ) <input type="checkbox"/> bushes or shrubs <input type="checkbox"/> shade cloth <input type="checkbox"/> A-frame structures <input type="checkbox"/> other If other, please describe: <input type="text"/>		
55	Do all turkeys have access to shade in the outdoor areas?		
56	Are perches provided in the outdoor areas?		
57	Are turkeys ever housed seasonally due to inclement conditions? <b>If YES</b> Do turkeys have access to a covered outdoor area when they are seasonally housed? <b>If YES</b> Do turkeys have continuous access to a covered outdoor area by 7 weeks of age? <b>If YES</b> Compared to the total indoor floor space of the house, is the covered outdoor area for each flock: <input type="checkbox"/> < 35% of the indoor area <input type="checkbox"/> ≥ 35% - 49% <input type="checkbox"/> ≥ 50% Does the covered outdoor area provide any of the following? ( <i>tick all that apply</i> ) <input type="checkbox"/> materials that encourage foraging behavior ( <i>e.g., whole grains, hay</i> ) <input type="checkbox"/> enrichments <input type="checkbox"/> litter <input type="checkbox"/> other ( <i>please describe below</i> ) <input type="text"/> Are there slatted and/or wire floors?		
58	Please mark the months of the year that birds typically have <b>access to the outdoors</b> : <input type="checkbox"/> N/A <input type="checkbox"/> All Yr <input type="checkbox"/> Jan <input type="checkbox"/> Feb <input type="checkbox"/> Mar <input type="checkbox"/> Apr <input type="checkbox"/> May <input type="checkbox"/> June <input type="checkbox"/> July <input type="checkbox"/> Aug <input type="checkbox"/> Sept <input type="checkbox"/> Oct <input type="checkbox"/> Nov <input type="checkbox"/> Dec		

<b>ADDITIONAL QUESTIONS FOR <u>ALL</u> OPERATIONS</b>		<b>YES</b>	<b>NO</b>
59	Is there a procedure in place to identify your operation's turkey flocks upon arrival at the slaughter and/or processing plant? <i>(e.g., producer #; barn/floor identification#; flock identification, or other)</i>		
60	Are there any governmental regulations or laws, whether local, state, federal, provincial, or other) that prohibit adherence to any of the 5-Step standards?		
	Please explain <u>and</u> provide legal or regulatory citation:		
	<b>If <u>YES</u></b>		

**By signing below, you acknowledge that you are an authorized representative of the operation and affirm that all information herein is accurate.**

<b>Signature</b>	
<b>Title / Position</b>	
<b>Date</b>	
<b>Printed Name</b>	