



May 25, 2018

The attached Catching and Load out report has been made mandatory by the BC Broiler Hatching Egg Commission for all flocks shipped as of May 23, 2018. These forms are to be sent to the Commission office post shipping

Many of you are very familiar with this form as BC Chicken Growers and the BC processors currently use a version of it.

A key element to the report is the requirement for Producers to be attendance prior to the beginning of catching, at least once during the process, and when catching/ loading has been completed.

Correspondence from BCFIRB was received by all 4 feather groups regarding catching/loading. That letter is attached for your review. As a result, the BC Hatching Egg Commission is reviewing their concerns and the attached form is subject to that review.

Regards,

A handwritten signature in black ink that reads "Jim Collins".

Jim Collins, Chair
BC Broiler Hatching Egg Commission

BC Broiler Hatching Egg Commission

#180 – 32160 South Fraser Way, Abbotsford, BC V2T 1W5 • www.bcbhec.com

LOAD OUT REPORT

Ship Date:	Farm Name:
Farm Representative:	Catching Contractor:
Contact Email:	Lead Catching Supervisor:
Contact Phone:	Start Time:

PRIOR TO LOADING

Producer Responsibilities Barn doors unlocked: <input type="checkbox"/> yes <input type="checkbox"/> no Feed & water lines raised: <input type="checkbox"/> yes <input type="checkbox"/> no Temperature & ventilation adjusted: <input type="checkbox"/> yes <input type="checkbox"/> no Barn lighting adjusted: <input type="checkbox"/> yes <input type="checkbox"/> no Notify catchers of abnormalities <input type="checkbox"/> yes <input type="checkbox"/> N/A	Comments:
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Lead Supervisor Responsibilities Ensure catchers are trained: <input type="checkbox"/> yes <input type="checkbox"/> no Training records available: <input type="checkbox"/> yes <input type="checkbox"/> no Catching SOP's available: <input type="checkbox"/> yes <input type="checkbox"/> no Notify farmer of abnormalities: <input type="checkbox"/> yes <input type="checkbox"/> N/A	Comments:
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Farm Review Yard conditions facilitate loading: <input type="checkbox"/> yes <input type="checkbox"/> no Washroom facilities available: <input type="checkbox"/> yes <input type="checkbox"/> no Loading area: <input type="checkbox"/> smooth <input type="checkbox"/> rough <input type="checkbox"/> other Confirm barns/floors being shipped:	Comments:
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Names of Catchers:		

Transfer of Care Discussed health and condition of flock: <input type="checkbox"/> yes <input type="checkbox"/> no Are birds ready to be loaded and shipped? <input type="checkbox"/> yes <input type="checkbox"/> no	Comments:
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Farm Representative Signature: _____

Lead Supervisor Signature: _____

DURING CATCHING

Max # of birds per drawer:	
Max # of birds per hand:	

Observations during Catching	Comments:
Did the farm representative observe the catching process? <input type="checkbox"/> yes <input type="checkbox"/> no	
Was the load out equipment in good working condition? <input type="checkbox"/> yes <input type="checkbox"/> no	
<i>If no, please explain:</i>	
Corrective action(s) taken:	

AFTER LOADING

Observations after Catching	Comments:
Were birds loaded in a timely, efficient manner to minimize bird stress? <input type="checkbox"/> yes <input type="checkbox"/> no	
<i>If no, please explain:</i>	
Corrective action(s) taken:	
Was it necessary to contact the farm representative during catching? <input type="checkbox"/> yes <input type="checkbox"/> no	
<i>If yes, was the representative readily available?</i>	

Barn Conditions	Comments:
Litter condition: <input type="checkbox"/> wet <input type="checkbox"/> damp <input type="checkbox"/> dry <input type="checkbox"/> other	
Did you notify the farm representative of any abnormalities? <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> N/A	
Damage to barns or equipment: <input type="checkbox"/> yes <input type="checkbox"/> no	
Estimated number of birds not fit for loading:	
Estimated number of mortalities left in barn:	

Completion of Catching	Time:
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Farm Representative Signature: _____
Lead Supervisor Signature: _____