

AVIAN EXHIBITION PERMIT

Oklahoma Department of Agriculture, Animal Industry Service
2800 N Lincoln Blvd, OKC, OK 73105

Phone: 405-522-6139 Fax: 405-522-0756 Email: sherrie.davis@ag.ok.gov

I, _____, do hereby request permission of the Oklahoma Board of
(Please Print Person Responsible)

Agriculture to hold an exhibition at: _____

(Name and Location of Exhibition)

on, _____ I will allow poultry sales at the exhibition: Yes _____ No _____
(date)

I understand all the poultry must meet the requirements specified in the Oklahoma Statutes and Rules and Regulations of the Oklahoma Board of Agriculture. I agree to be responsible for determining that all poultry meets exhibition requirements prior to entry into the exhibition facility/parking lot.

- 1. Any poultry being exhibited in Oklahoma shall be free of visible evidence of disease.**
- 2. Out of state poultry currently participating in NPIP (National Poultry Improvement Plan) shall have a NPIP 9-3 form or a CVI (Certificate of Veterinary Inspection) indicating the flock NPIP # within 30 days of entry.**
- 3. Out of state poultry 4 months of age and older not currently participating in NPIP shall have a CVI within 30 days of entry + Individual ID by leg/wing band + Negative Pullorum/Typhoid test within 90 days prior to entry.**
- 4. Out of state poultry less than 4 months of age must originate from an NPIP flock and shall have a 9-3 form or a CVI indicating flock NPIP # within 30 days of entry.**
- 5. Poultry sold to an out of state destination must follow import rules and regulations of the destination state.**
- 6. This permit is effective only for the above date listed.**

I agree to keep adequate records necessary to determine all exhibitors, buyers, and/or sellers of avian species and will make these records available for inspection by any authorized agent of the Oklahoma Board of Agriculture upon request. Records of all exhibitors, buyers, and/or sellers must include name, address and telephone numbers. These records will be maintained for a period of one (1) year following the conclusion of the event permitted by this application. *IT IS NOT NECESSARY TO SUBMIT COPIES OF THESE RECORDS, UNLESS REQUESTED. THERE IS NO CHARGE FOR THIS PERMIT.*

(State certified tester name if applicable)

(Signature of Person Responsible)

(Address, Phone, Fax/email of Person Responsible)

Approved by: _____ Date: _____

March 18, 2025