

**APPLICATION TO OBTAIN
SPECIMENS FROM OFFICIAL ESTABLISHMENTS**

NC Department of Agriculture and Consumer Services
Meat and Poultry Inspection Division
Agriculture Building
1001 Mail Service Center
Raleigh, North Carolina 27699-1001

REQUESTER INFORMATION

*1. NAME:

2. ORGANIZATION:

*3. DATE:

*4. TELEPHONE NUMBER:

*5. ADDRESS:

6. EMAIL ADDRESS:

ESTABLISHMENT(S) WHERE SPECIMENS ARE TO BE OBTAINED

*7. NAME:

*8. CITY:

*9. The above applicant desires the following specimens of diseased, condemned, or inedible material, including embryos and specimens of animal or poultry parasites described below. Consent of the official establishment has been obtained by the applicant to remove specimens.

*10. TYPE AND QUANTITY OF MATERIAL DESIRED:

*11. INDICATE PURPOSE OF COLLECTING SPECIMENS:

Education Research Retrieving from own animals

Other (Specify) _____

*12. DESCRIBE USE TO BE MADE OF SPECIMENS:

The applicant agrees that the collection and handling of this material shall be at such time and place and in such a manner as not to interfere with the inspection or to cause any objectionable condition. Applicant also agrees to properly dispose of this material when finished with it.

13. APPLICANT'S SIGNATURE:

14. APPLICANT'S TITLE