

**TRUE AND COMPLETE OFFICIAL TRANSLATION TO ENGLISH OF A DOCUMENT  
WRITTEN IN SPANISH BY THE OFFICIAL TRANSLATOR FOR THE REPUBLIC OF  
COLOMBIA, NILSEN ARINGHARD.**

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**COLOMBIAN AGRICULTURAL INSTITUTE**

SUB-DIRECTORATE FOR ANIMAL PROTECTION AND REGULATION

ZOOSANITARY RISK PREVENTION GROUP

**ASSESSMENT OF FACILITIES FOR EQUINE PRODUCTION FOR GENETIC  
IMPROVEMENT**

**1. GENERAL INFORMATION**

1.1. DATE OF REPORT: \_\_\_\_\_

1.2. COUNTRY OF ORIGIN: \_\_\_\_\_

1.3. NAME OF PREMISES: \_\_\_\_\_

1.4. DEPT./STATE: \_\_\_\_\_

1.5. MUNICIPALITY: \_\_\_\_\_

1.6. QUADRANT: \_\_\_\_\_

1.7. PROPRIETOR: \_\_\_\_\_

1.8. ADDRESS: \_\_\_\_\_

1.9. TELEPHONE: \_\_\_\_\_

1.10. Technical Assistant: Yes \_\_\_ No \_\_\_, if yes describe type of relationship \_\_\_\_\_

\_\_\_\_\_

1.11. Exports to other country(s). Yes \_\_\_ No \_\_\_

Which one(s)? \_\_\_\_\_

1.12. Animal Identification System: \_\_\_\_\_

\_\_\_\_\_

1.13. Altitude above sea level: (meters) \_\_\_\_\_

1.14. Rainfall Patterns: \_\_\_\_\_

1.15. Animal Management: Pasture \_\_\_\_\_ Confinement \_\_\_\_\_ Semi-confinement \_\_\_\_\_

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**2. CURRENT CENSUS**

SPECIES	AGE GROUPS	POPULACIÓN		OBSERVATIONS
		CURRENT CENSUS	NUMBER TO EXPORT	
EQUINE	< 1 yr.			
	1 – 2 yr.			
	> 2 yr.			
	TOTAL			

**3. RECORDS**

3.1. Vaccinated: Yes\_\_\_ No\_\_\_ (Attach records for last year)

3.2. Type of feed for animals: Balanced Feed Yes\_\_\_ No\_\_\_

Grass & Fodder Yes\_\_\_ No\_\_\_

Mineral Salts: Yes\_\_\_ No\_\_\_ Other: Yes\_\_\_ No\_\_\_

Which \_\_\_\_\_

Records of medical treatments: Yes\_\_\_ No\_\_\_ (Attach records for last year)

Official Service audit records: Yes\_\_\_ No\_\_\_ How Often\_\_\_ ((Attach records for last ear)

Records of animals in associations Yes\_\_\_ No\_\_\_ (Attach records)

Records of entry for replacement animals: Yes\_\_\_ No\_\_\_ These animals live on farms \_\_\_

Trade Shows \_\_\_ Other Country \_\_\_ Which \_\_\_ Other \_\_\_ Which \_\_\_\_\_

(Attach records for last ear)

List the rate of morbidity and mortality for diseases presented on the premises over the past 120 days \_\_\_\_\_

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Production System. Natural Breeding \_\_\_\_\_ Insemination \_\_\_\_ Embryo Transfer \_\_\_\_\_

Types of disinfectants used \_\_\_\_\_

Treatment for ecto and endoparasites Yes \_\_\_ No \_\_\_

Type of product \_\_\_\_\_

**4. FACILITIES AND EQUIPMENT AVAILABLE (ATTACH PHOTOGRAPHS)**

		Yes	No	Condition		
				G	F	P
1	Stables					
2	Scale					
3	Isolation Unit					
4	Feeders					
5	Grazing fields					
6	Warehouses					
7	Slaughter Corridor or Fetters					
8	Storage room for fertilizers, herbicides					
9	Storage room for Medication					
10	Corral or Quarantine Unit					
11	Storage room for Feed					
12	Unloading Dock					
13	Peripheral Fencing					
14	Equipment for handling animals					
15	Type & material of buildings					

G: Good F: Fair P: Poor

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**5. BIOSECURITY CONDITIONS**

Facilities with ease of drainage, cleaning, and disinfecting Yes \_\_\_ No \_\_\_

Procedures for entry of personnel \_\_\_\_\_  
\_\_\_\_\_

Describe the handling of excreta \_\_\_\_\_  
\_\_\_\_\_

Procedures for the entry of vehicles \_\_\_\_\_  
\_\_\_\_\_

Procedures for the entry of animals \_\_\_\_\_  
\_\_\_\_\_

Disposal of dead animals: \_\_\_\_\_  
\_\_\_\_\_

Pest Control (rodents, insects) \_\_\_\_\_  
\_\_\_\_\_

Disposal of residual water: \_\_\_\_\_  
\_\_\_\_\_

Filled out by: Licensed Veterinarian, Location \_\_\_\_\_,

Name \_\_\_\_\_ License No, \_\_\_\_\_

Signature \_\_\_\_\_

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**Official Translator**