

## Community Sale Requirements for Poultry and Ratites

*Poultry means Chickens, Turkeys, Waterfowl, and Game Birds*

### Identification

- All poultry and ratites, except baby poultry, must be individually identified with a leg or wing band with a number on the band. The band may also include other letters such as names/initials.
  - Hatching eggs and young poultry that are too small to band can be sold as a group if the National Poultry Improvement Plan (NPIP) number is written on the cage, box or enclosure.



### Poultry Disease Requirements

- All hatching eggs, poultry and ratites must originate from a hatchery or breeding flock that is NPIP Pullorum-Typhoid (PT) Clean or be negative to a pullorum-typhoid test within 30 days prior to the sale.
  - Turkeys cannot be tested on the same day. Blood must be sent to an approved lab prior to sale.
- All hatching eggs, poultry and ratites must be accompanied by a certificate or test chart that shows compliance with the requirements above. Examples include: pullorum-typhoid test report (Rapid Whole Blood Test Reporting Form or Laboratory Report), Hatchery Permit Card, NPIP VS FORM 9-2, and NPIP VS FORM 9-3\*
- If a test chart is used to demonstrate compliance, the band number on the bird must match the test chart.

<b>Rapid Whole Blood Test Reporting Form</b>		<b>m MINNESOTA</b> BOARD OF ANIMAL HEALTH Minnesota Poultry Testing Laboratory P.O. Box 124 • 122 Business Hwy 71 NE • Willmar, MN 56201-0126 509-231-3170 • Fax 509-231-6071 • <a href="mailto:poultry@state.mn.us">poultry@state.mn.us</a>		FOR OFFICE USE ONLY PREM ID: _____ COUNTY: _____
Owner: <b>John Smith</b>	Address: <b>123 Chicken Drive</b>	City: <b>Hennville</b>	Phone: <b>320-231-0170</b>	State: <b>MN</b> Zip: <b>55000</b>
Date of Test: <b>8-27-19</b>	Reason for Test (select one): Annual Breeder Flock <input type="checkbox"/> Sale <input checked="" type="checkbox"/> Exhibition <input type="checkbox"/>	Antigen Manufacturer: <b>Charles River Laboratories</b>	Serial Number: <b>96003P</b>	Exp. Date: <b>9-20-19</b>
Test Results (complete all sections): Number Tested: <b>30</b> Number of Reactors: <b>0</b> Number Negative: <b>30</b>	Band Numbers of Reactors: _____	Bird Information		
FLOCKOWNER'S AGREEMENT: I hereby agree to place my flock under the supervision of the Board of Animal Health and to comply with the rules of the Board. <b>John Smith</b> Flockowner Signature I hereby certify that I personally tested the birds reported above for Pullorum-Typhoid disease and this test chart is a correct statement of the results obtained. <b>Jane Doe</b> <b>12345</b> Authorized Poultry Testing Agent Signature Testing Agent Number <small>Return white copy to MPTL within 14 days of testing, yellow copy to flockowner, pink copy to testing agent.</small>		Breed: _____ Number Tested: <b>10</b> Band Numbers: <b>1-10</b>	Sjirkie <b>10</b> <b>11-20</b>	
		Call Ducks: <b>10</b> <b>21-30</b>		

Rapid Whole Blood Test

<b>University of Minnesota</b>		Report Status: Final 03/05/2025 Stacy B. Pollock MPTL Section Manager										
Minnesota Poultry Testing Laboratory 612 Business Hwy 71 NE Willmar, MN 56201-0126	Serology Report	320-231-3170 Fax: 320-231-6071 e-mail: <a href="mailto:vdh@umn.edu">vdh@umn.edu</a>										
Accession Number: <b>M25-006512</b>	Owner: <b>JOE SMITH</b> <b>12345 WEGBY ST</b> <b>Willmar, MN 56201</b>											
Received Date: <b>02/27/2025</b>	Site: <b>NO</b>											
Reference: <b>127876</b>	Species: <b>Avim. Miscellaneous</b>											
Premises ID: _____	Breed: <b>*</b>											
Date(s) Sampled: _____	Age: _____	Sex: <b>Female</b>										
Submitted by: <b>Minnesota Board of Animal Health - MPTL</b> <b>615 North Robert Sauer</b> <b>Stuart Paul, MN 55101</b> <b>USA</b>	Weight: _____											
<table border="1"> <tr> <td>Species (All Species)</td> <td>Age</td> <td>Sex</td> <td>Sampled (All Species)</td> <td>Reported (All Species)</td> </tr> <tr> <td>1234567</td> <td>8</td> <td>F</td> <td>Y</td> <td>Y</td> </tr> </table>			Species (All Species)	Age	Sex	Sampled (All Species)	Reported (All Species)	1234567	8	F	Y	Y
Species (All Species)	Age	Sex	Sampled (All Species)	Reported (All Species)								
1234567	8	F	Y	Y								

Lab Test Results

<b>m MINNESOTA</b> BOARD OF ANIMAL HEALTH	Types of Poultry: <input checked="" type="checkbox"/> Chickens <input checked="" type="checkbox"/> Turkeys <input type="checkbox"/> Upland Gamebirds <input checked="" type="checkbox"/> Waterfowl <input type="checkbox"/> Other
2025 WEGBY Hatchery and Breeding Flock Facility Permit Card	NPIP Classification
Premises ID # <b>MM123456</b>	<input checked="" type="checkbox"/> US Pullorum-Typhoid Clean
Joe's Hatchery - Joe Smith 1234 Wogby St NE, Willmar, MN 56201	<input type="checkbox"/> US Mycoplasma gallisepticum (MG) Clean
Hatchery/Owner Name	<input type="checkbox"/> US Mycoplasma synoviae (MS) Clean
Permit valid from <b>January 1, 2025</b> until <b>December 31, 2025</b>	<input type="checkbox"/> US H5/H7 Avian Influenza (AI) Clean
Minnesota Poultry Testing Laboratory P.O. Box 124 • 122 Business Hwy 71 NE • Willmar, MN 56201-0126 509-231-3170 • Fax 509-231-6071	<input type="checkbox"/> US Salmonella Monitored
	<b>Senior Veterinarian</b>

Hatchery Permit Card

\*These pictures are samples only and do not necessarily show the entire form in each image.

## Out-State Requirements

- All birds originating from another state must also meet Minnesota import requirements. Import requirements can be found at <http://www.mn.gov/bah/imports>
- All out-state birds must be accompanied by a Minnesota Import Permit and a Certificate of Veterinary Inspection, NPIP VS FORM 9-3, or an equivalent form as approved by the board.
- Import permit examples are shown below\*:

**MINNESOTA BOARD OF ANIMAL HEALTH**  
 Minnesota Poultry Testing Laboratory  
 P.O. Box 126  
 622 Business Hwy 71 NE  
 Willmar, Minnesota 56201  
 320-231-5170  
 poultry@state.mn.us | www.mn.gov/bah

2019-2020 Application to Import Poultry and/or Hatching Eggs into Minnesota  
 Annual Permit (Expires August 31, 2020)

**SECTION I. APPLICANT INFORMATION**

Business Name: Ideal Nugget Contact Name: Betty Johnson  
 Mailing Address, City, State, Zip: 499 Ronald Drive, Willmar, MN 56201  
 Hatchery/Farm Address, City, State, Zip: 499 Ronald Drive, Willmar, MN 56201  
 Phone: (320) 233-4567 Fax: E-mail: 499Ronald@gmail.com

Please indicate how you would like your permit to be sent to you.  Mailed  Emailed

I request permission to ship the following types of poultry into the state of Minnesota (check all that apply):			
Chickens	Hatching Eggs	Chicks	Chickens
Commercial egg-type		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Commercial meat-type		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Backyard and/or exhibition	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Turkeys	Hatching Eggs	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Commercial			
Backyard and/or exhibition			
Waterfowl and/or Upland Game Birds	Hatching Eggs	Baby Poultry	Adult Poultry
Other			
Other: _____			

I have read and agree to abide by the Import Requirements for Poultry and Hatching Eggs set forth by the Minnesota Board of Animal Health. I am a participant in the National Poultry Improvement Plan or equivalent poultry disease program.  
Signatures require notary.  
 Applicant Signature: Betty Johnson Date: 12/27/19 NPIP # 44-9999

Annual Import Permit

**Talbrake, Laura (BAH)**

Health, Animal (BAH) - animalhealth@state.mn.us  
 Sent: Friday, December 20, 2019 11:02 AM  
 To: Health, Animal (BAH) MPTL, Poultry (BAH)  
 Subject: Single Move Request form - Poultry

From: Health, Animal (BAH) - animalhealth@state.mn.us  
 Sent: Friday, December 20, 2019 11:02 AM  
 To: Health, Animal (BAH) MPTL, Poultry (BAH)  
 Subject: Single Move Request form - Poultry

First Name: Betty  
 Last Name: Johnson  
 Date of Request: 12/21/2019  
 Email: 499Ronald@gmail.com  
 Phone: (320)233-4567  
 First Name: Betty Johnson  
 Last Name: Ideal Nugget  
 Address 1: 499 Ronald Drive  
 Address 2: Willmar  
 State: MN  
 Zip / Post Code: 56201  
 Country: No  
 Is the destination farm name and address different than consignee above?: No  
 First Name: MPTL  
 Last Name: BAH  
 Address 1: 622 Business Hwy 71  
 Address 2: Willmar  
 State: Minnesota  
 Zip / Post Code: 56201  
 Country: Kansas  
 Is the destination farm name and address different than the consignee above?: No  
 Date of Movement: 12/31/19  
 Upload certificate to be used: MPTL/IdealNugget/2019.pdf  
 Type of poultry and/or hatching eggs: Other  
 Number of adult poultry (Other - Waterfowl and/or game birds): 5  
 Check box to confirm:  Checked

Single Move Import Permit

\*These pictures are samples only and do not necessarily show the entire form in each image.

For questions on poultry community sale requirements or accompanying documents, please call the Minnesota Poultry Testing Laboratory at 320-231-5170.

P.O. Box 126 • 622 Business Hwy 71 NE • Willmar, MN 56201-0125 • 320-231-5170 • Fax 320-231-6071

The Minnesota Board of Animal Health is an Equal Opportunity Employer and provider.

Revised 3/5/26