

National Microbiological Database-Ovine NMD Demographics

1. Plant Name:

| | |
|-------------|-------------------------------|
| Plant Name: | Licence/ registration number: |
| Address: | Postal address: |

2. Plant Manager and NMD Controller:

| | |
|-----------------|-------------|
| Plant Manager: | Telephone: |
| | Cell phone: |
| | E-mail: |
| NMD Controller: | Telephone: |
| | Cell phone: |
| | E-mail: |

3. Laboratory:

| | |
|----------------------------|-------------------------------------|
| Laboratory: | |
| Contact Laboratory Person: | Telephone: |
| | E-mail: |
| | Employed by premises or laboratory: |
| NMD Data Submitter: | Telephone: |
| | E-mail: |
| | Employed by premises or laboratory: |

4.

| | |
|------------|-------|
| Signature: | Date: |
| Name: | |

5. Halal slaughter (please tick appropriate box):

| | |
|------|-----|
| Yes: | No: |
|------|-----|

6. Tunnel-punching:

| | | |
|---------|-------------|-------|
| Manual: | Mechanical: | None: |
|---------|-------------|-------|

7. Head skinning:

| | | |
|---------|-------------|--------|
| Always: | At present: | Never: |
|---------|-------------|--------|

8. Hindleg shear:

| | |
|------|-----|
| Yes: | No: |
|------|-----|

9. Hock-cutting:

| | | |
|------------|---------------|---------------|
| Full-skin: | Partial skin: | Through wool: |
|------------|---------------|---------------|

10. Dragging on chain:

| | |
|------|-----|
| Yes: | No: |
|------|-----|

11. Fore-quarter flaying:

| | |
|--------|-------------|
| Knife: | Flaymaster: |
|--------|-------------|

12. Shoulder-pull:

| | |
|-------------|---------|
| Mechanical: | Manual: |
|-------------|---------|

13. Pre-evisceration wash:

| | |
|----------------|----------------------|
| High pressure: | Low pressure |
| Full: | Part (fore-quarter): |

14. Throughput:

| | |
|---------------------------|-------------------------------|
| Peak: ____ carcasses/hour | Off-peak: ____ carcasses/hour |
|---------------------------|-------------------------------|

15. Lairage time:

| |
|----------|
| Specify: |
|----------|

Brief description of pre-slaughter wash protocol employed:

Please describe any other procedures specific to your process that you think may favourably or adversely affect microbiological contamination of the carcass:

Other comments:

Please send Demographic by e-mail to: NationalMicrobiological.Database@nzfsa.govt.nz, or
Fax to: (04)894 2643.