# Request for Temporary Confinement due to Unforeseen, Immediate Circumstances

* Complete this form to request approval for each non-routine extended temporary confinement event or to extend an existing temporary confinement request.
* An operation’s [**L4.0 Mammalian and Non-Avian Living Conditions**](https://www.ccof.org/resource/l4-0-living-conditions/) and/or [**L4.2 Avian Living Conditions**](https://www.ccof.org/resource/l4-2-avian-living-conditions/) must include all reasons for routine and planned temporary confinement (e.g.: sorting, shipping, breeding, 4-H, FFA, animals’ stage of production, etc.)

*NOP 205.239(b)-(c) and NOP 205.241(d) allow organic producers to confine their animals for specific approved reasons.*

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| --- | --- | --- | --- | --- | --- |
| Operation name: |  | | | | |
| Submitted by (name): | |  | | | |
| Animal group(s) to be confined: | | |  | | |
| Circumstance affecting your animals: | | | |  | |
| Start date and duration of confinement: | | | | |  |

1. Submit the following required documentation with your request:

Letter from a state or federal veterinarian recommending/requiring confinement in your location

Updated map/description of your operation’s location to identify proximity to risk vectors

For avian diseases: Positive pathogenic confirmations in migratory flyway

Updated [**L4.0 Mammalian and Non-Avian Living Conditions**](https://www.ccof.org/resource/l4-0-living-conditions/) and/or [**L4.2 Avian Living Conditions**](https://www.ccof.org/resource/l4-2-avian-living-conditions/) to list current circumstance as a potential reason for confinement (if not already included in OSP)

Written description of how you will evaluate the need for continued confinement during this requested time.

1. Additional information to support your confinement request:

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| Printed Name Manager/Owner | Signature | Date |