# 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.*

|  |  |
| --- | --- |
| 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 |