NIGERIAN AGRICULTURAL INSURANCE CORPORATION

POULTRY FARM RECORDS:_____
NAME OF POULTRY FARM:_____
ADDRESS:_____
POLICY NO:_____
PEN NO:_____
BREED:_____
BATCH NO:_____
CLASS OF POULTRY:_____

HOUSING SYSTEM:_____
ARRIVAL DATE AND NO:_____

DAY	DATE	NO. OF BIRDS	FEED CONSUMPTION/ DAY/(KG)	DRUGS/VACCINES ADMINISTERED	EGGS COLLECTED/ COLLECTED WEIGHT	DISEASE INCIDENCE	NO. OF MORTALITY	NO. OF CULLED BIRDS	BALANCE OF BIRDS	REMARKS