

**GEORGIA / FEDERAL COOPERATIVE JOHNES CONTROL PROGRAM
Veterinarian's Application to Reserve Payment for Risk Assessment/Farm Management Plan**

Please Print or Type

Veterinarian's Name _____

Address, City, State ZIP _____

Signature _____ Date _____

Owner's Name _____ Number of Head _____

Herd Name (If different) _____

Address, City, State ZIP _____

Signature _____ Date _____

STATE OFFICE USE

Application Approved to Reserve
Payment for Risk Assessment/Farm
Management Plan (\$300.00)

Not Approved

Date

Assistant State Veterinarian

Form BD-16 is a request for approval to conduct Johnes's program work on a producer's farm. This form (BD-16) shall be submitted to The Georgia Department of Agriculture Animal Health office (address below), for each producer each year, and have the approved BD-16 on file before you complete any work on a producer's farm for Johnes program reimbursement. Prior approval is required in order to ensure that funds are available for payment.

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Please Note: The Georgia Department of Agriculture will receive copies of all results for laboratory testing submitted through the Johnes Cooperative Agreement Program. In addition, all Johnes positive fecal cultures will be reported by the laboratory as required by Georgia's Reportable Animal Disease statutes.