the Center for
Food Security
&Public Health
IOWA STATE UNIVERSITY®
College of Veterinary Medicine

Movement Logs

Example* Vehicle, Equipment Entry Log

Farm Name: _____

Farm PremID (PIN): _____ Address: _____ Contact Name: _____ Phone: _____

Date	License Plate # & State	Driver Name	Driver Phone #	Vehicle Description	Reason for Entry	C&D on site?	Initials of Person Supervising Entry
						Yes No	
						Yes No	
						Yes No	
						Yes No	
						Yes No	
						Yes No	
						Yes No	
						Yes No	
						Yes No	
						Yes No	
						Yes No	

*Note that this form is just an example and may not necessarily meet the requirements of the Responsible Regulatory Official or the needs of the producer.