

## Agent Orange (Herbicide Exposure) Intake Form

*If you are a veteran or a veteran's family member, you may be entitled to veterans' benefits. In particular, if the veteran served in Vietnam, you may be eligible for benefits based on exposure to Agent Orange or other herbicides. The following questions will help you and your advocate organize the information you need to apply for benefits. If additional room is needed to complete an answer, please attach a separate piece of paper. Do not send this form to the VA; give it to your accredited service officer.*

Date

- (1) Name of veteran:  
First Middle Last
  
- (2) Name used in service if different:
  
- (3) Applicant if other than the veteran:  
First Middle Last
  
- (4) Relationship to veteran:
  
- (5) Address:  
Number Street Apt. No.  
City State Zip Code
  
- (6) Mailing address:  
Number Street Apt. No.  
City State Zip Code
  
- (7) Telephone:  
Home ( )  
Work ( )
  
- (8) Date of birth:    /    /     
MonthDay Year
  
- (9) Social Security number:    -    -
  
- (10) Single( ) Married( ) Separated( ) Divorced( ) Widowed( )
  
- (11) Are you currently employed? yes( ) no( )

If yes, what is your occupation?

(12) If not employed, are you able to work? yes( ) no( )

(13) If you are not employed, is it because of medical problems related to your military service? yes( ) no( )

(14) Are you receiving Social Security Disability, Supplemental Social Security, or other forms of government assistance? If you are, please specify:

(15) Do you have dependents?  
yes( ) no( )

If yes, how many?

Please list your dependents' names, how they are related to the veteran, dates of birth, and Social Security numbers:

**Information Related to Service**

(16) Are you a veteran of the U.S. armed forces?  
yes( ) no( )

*If you are a veteran, please attach a copy of your discharge form, the DD 214. If you do not have a copy of your DD 214, please obtain from your advocate and complete and attach Standard Form (SF) 180, Request Pertaining to Military Records, to obtain a copy of your DD 214.*

(17) To what branch of the service (army, navy, air force, marines, coast guard, merchant marine) did you belong?

(18) In what era (Korea, Vietnam, Persian Gulf, OEF/OIF, or other) was your service?

(19) Please list your dates of service:

Entry \_\_\_\_\_ Discharge\_\_\_\_\_

Entry \_\_\_\_\_ Discharge\_\_\_\_\_

Entry \_\_\_\_\_ Discharge\_\_\_\_\_

(20) Please state your type of discharge:

(21) Were you in combat?  
yes( ) no( )

(22) Were you wounded?  
yes( ) no( )

If so, where on the body?

(23) Are you still having medical problems caused by the wound(s)?  
yes( ) no( )

If so, what are the problems?

(24) Were you treated for any injury, disability, or disease in service?  
yes( ) no( )

If yes, briefly describe the disability or disease.

### **Information Related to VA Benefits**

(25) Have you ever applied for VA benefits?  
yes( ) no( )

If yes, check all that apply:

- |  |  |
|--|--|
| <input type="checkbox"/> Compensation                    | <input type="checkbox"/> Pension                 |
| <input type="checkbox"/> Pension plus aid and attendance | <input type="checkbox"/> Pension plus housebound |
| <input type="checkbox"/> Medical care                    | <input type="checkbox"/> Education               |
| <input type="checkbox"/> Vocational rehabilitation       | <input type="checkbox"/> Nursing home care       |
| <input type="checkbox"/> Home loan guaranty              |  |

Other (please specify):

*If this is a new claim, ask your advocate about filing an informal claim.*

(26) If you have filed a claim before, please give the claim number that the VA assigned:

(27) Are you now receiving VA benefits?  
yes( ) no( )

If yes, check all that apply:

- |  |  |
|--|--|
| <input type="checkbox"/> Compensation                    | <input type="checkbox"/> Pension                 |
| <input type="checkbox"/> Pension plus aid and attendance | <input type="checkbox"/> Pension plus housebound |
| <input type="checkbox"/> Medical care                    | <input type="checkbox"/> Education               |
| <input type="checkbox"/> Vocational rehabilitation       | <input type="checkbox"/> Nursing home care       |
| <input type="checkbox"/> Home loan guaranty              |  |

Other (please specify):

(28) At which VA regional office is your claim file located?

(29) Were you ever treated at a VA medical center or outpatient facility?  
yes( ) no( )

If yes, please specify when, where, and what the treatment was for:

(30) Have you ever sought counseling or help from a Vet Center?  
yes( ) no( )

If yes, please specify when and where:

(31) Did you serve in or visit in Vietnam, serve in the inland waterways, or aboard a ship that docked to the shore of Vietnam, between January 9, 1962 and May 7, 1975?  
yes( ) no( )

*If your answer was yes, then the VA concedes that you were exposed to herbicides, skip to Question 33. If no, then you have to prove you served in an area where herbicides were used and prove exposure to the herbicides, go to Question 32.*

(32) Did you serve in any of the following locations?

*\*\* Note – The veteran may still have to provide evidence of exposure to herbicides, even if he or she served in the areas below*

*Cambodia*

( ) Southeastern part of Kompong Cham Province and Dar and Prek Clong plantations, 6/1969

*Canada*

( ) Base Gagetown near Fredericton, New Brunswick, Canada, between 6/20/1967-6/24/1967

*India*

( ) Kumbla, between 1945 and 1946

*Korea*

( ) 3<sup>rd</sup> Brigade, 2<sup>nd</sup> Division area, between 7/23/1968 and 7/24/1968  
( ) 2<sup>nd</sup> and 4<sup>th</sup> Brigades, 2<sup>nd</sup> Division area, 8/1968  
( ) 3<sup>rd</sup> Brigade, 2<sup>nd</sup> Division area, 10/3/1968

*Laos*

( ) Laos, 12/1965 - 1967

*Puerto Rico*

( )\_ Las Mesas and La Jagua experimental areas at Mayaguez, Puerto Rico, 2/1956 - 6/1956

( )Guanica and Joyuda, 6/1956 - 9/1956

( ) Las Mesas and La Jagua, Mayaguez, Joyuda at Cabo Rojo, and Guanica Insular Forest at Guanica, 9/1956-12/1956

( ) Las Mesas and La Jagua, Mayaguez, Guanica Beach, 1/1957 - 3/1957

( ) Las Mesas and La Jagua, Mayaguez, Guanica Beach, 4/1957 - 6/1957

( ) Las Mesas and La Jagua, Mayaguez, 7/1957 - 12/1957

( ) Loquillo, 4/1966, 10/1966

( ) Las Marias, 2/1967 - 12/1967

( ) Near Rio Grande, on the northeast coast of Puerto Rico, 8/23/1967, 10/18/1967, 12/21/1967-12/26/1967

( ) Las Mesas Cerros, 5/24/1968, 5/26/1968, 5/27/1968

#### *At Sea*

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( ) Operation PACER HO, near Gulfport, MS , summer 1977

#### *Thailand*

( ) Replacement Training Center of the Royal Thai Army near Pranburi, 1964 ,1965

#### *United States*

#### *Arizona*

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( ) Pinal Mountains near Globe, 1965, 1966, 1968, and 1969

#### *Arkansas*

( ) Fort Chaffee, 5/16/1967 - 5/18/1967, 7/22/1967 - 7/23/1967, 8/23/1967 - 8/24/1967

#### *California*

( ) Brawley, 1950-51

#### *Florida*

( ) Orlando and Cocoa, 1944

( ) Near Lake George, Spring 1944

( ) Orlando, FL at Army Grove Air Force's Tactical Center 3/14/1944, 4/12/1944

( ) Marathon, 3/21/1944 - 3/23/1944

( ) Bushnell Army Air Field, 2/1945-4/1945

( ) Avon Air Force Base, FL 2/1951 - 4/1951, Spring 1954

( ) Englin Air Force Base, 11/1952 - 12/1952, 6/11/1968-9/12/1968, or the C-52A test area, 1962-70

( ) Jacksonville, FL 7/18/1962 - 7/21/1962

( ) Apalachicola National Forest near Sophopy, 5/3/1967 - 5/8/1967

*Georgia*

( ) Fort Gordon, 7/15/1967 - 7/17/1967

*Hawaii*

( ) Hilo, 12/1966

( ) State Forest area, 3500 ft.elevation on slope of Mauna Loa, near Hilo, HI, 12/2/1966, 12/4/1966, 1/12/1967

( ) Kauai, 1967

( ) Kauai Branch Station near Kapaa, Kawai, 6/1967, 10/1967, 12/1967, 2/1968

*Indiana*

( ) Vigo Plant CWS, Terre Haute 5/1945 - 9/1945

( ) Jefferson Proving Grounds, Madison, Summer 1945

*North Dakota*

( ) Hays, KS; Langdon, ND, 1960

*Kentucky*( ) Fort Knox 1945

*Maryland*

( ) Camp Detrick - Fields A, B, and C, 1946-47, or Fields C, D, and E, 1948, 1949

( ) Camp Detrick - Fields A, B, D, and E 1950 **or** Field F 1950-51

( ) Camp Detrick – Area B, Spring/Summer 1953

( ) Fort Detrick; Fort Ritchie, MD 1956-57

( ) Fort Detrick 8/1961 - 6/1963

( ) Fort Ritchie 1963

( ) Fort Meade 1963

( ) Poole's Island, Aberdeen Proving Ground 7/14/1969

*Mississippi*

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( ) Near Wayside, Wilcox Road, Greenville, 9/19/1967

( ) Fulcher Ranch, Greenville, 4/15/1968

( ) Gulfport, 1968-70

*Montana*

( ) Galatin Valley near Bozeman 7/3/1953, 7/6/1953, 7/14/1953

*New York*

( ) Fort Drum, 1959

*Pennsylvania*

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Stone Valley Experimental Forest in Huntington County and near State College in Centre County 3/1969 - 10/1970

*Rhode Island*

Kingston, 7/26/1949, 1950-51

*Texas*

Beaumont, 6/1944 or 1950-51

Weslaco, 5/1967 - 1/1969

*Utah*

Granite Peak Summer 1945

*Washington*

Prosser 1950-51

*Wisconsin*

Marinette 5/1967 - 1/1969

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(33) Have you been diagnosed as having:

Acute or Subacute Peripheral Neuropathy

AL Amyloidosis

Chloracne

Chronic B-cell Leukemias

Hodgkin's Disease

Ischemic Heart Disease

Diabetes Mellitus (Type II)

Multiple myeloma

Non-Hodgkin's lymphoma

Parkinson's Disease

Porphyria cutanea tarda

Prostate Cancer

Respiratory cancer (lung, bronchus, larynx, trachea)

Soft Tissue Sarcoma

(34) If you do not have one of the conditions named in question (33), do you have medical evidence or expert medical opinion to support the conclusion that your condition was caused by exposure to herbicides?

yes( ) no( )

(35) Have you had the VA's Agent Orange registry examination?

yes( ) no( )

(36) Do you have a biological child with spina bifida who was conceived after the date on which you first entered Vietnam?