

UNITED STATES DEPARTMENT OF AGRICULTURE Agricultural Marketing Service Fruit and Vegetable Programs Fresh Products Branch

REQUEST FOR AUDIT SERVICES

(This is the only acceptable form for fax or electronic submission to USDA for audit requests)

NOTE: Fill in all appropriate blocks. Requested services may be delayed because of incomplete information. Type of service requested must be selected below.

DATE OF REQUEST:		ANT	TICIPATED DATE OF AUDIT:		
AUDITEE INFORMATION			FARM / FACILITY INFORMATION		
Company Name:			Location:		
Street Address:			Location.		
City, State & Zip:			Total Acres /		
Phone Number:			Total Sq Feet		
Contact Person:			to be audited:		
APPLICANT INFORMATION			COMMODITIES TO BE COVERED BY AUDIT (Please List)		
Company Name					
Phone Number:					
Fax Number:					
E-mail:					
Contact Person:					
TYPE OF AUDIT SERVICES REQUESTED					
Type of Audit(s) Requested (Please choose at least one))	Scope of GAP&GHP Audit (Please choose all that apply)		
☐ Good Agricultural Practices & Good Handling Practices (GAP&GHP) (Select Audit Scopes)			□ Part 1 – Farm Review		
, , ,			☐ Part 2 – Field Harvest & Field Packing Activities		
☐ Mushroom Specific GAP Audit (M-GAP)			□ Part 3 – House Packing Facility		
☐ Tomato GAP Audit (T-GAP)		□ Part 4 – Storage & Transportation			
☐ Leafy Greens Audit (LGMA)		□ Part 6 – Wholesale Distribution Center / Terminal Warehouse			
☐ Identity Preservation Audit (IP)					
□ Other, Specify:			□ Part 7 – Preventative Food Defense Procedures		
ADDITIONAL REMARKS					
To download a copy of the USDA Good Agricultural Practices & Good Handling Practices audit checklist, please visit the USDA website at http://www.ams.usda.gov/gapghp .					

Once a request has been received, a USDA representative will make contact within 48 hours of receipt to schedule the audit.

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0581-XXXX. The time required to complete this information collection is estimated average .02 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

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