**ADMINISTRATIVE COMMITTEE FOR PISTACHIOS**

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**FAILED LOT NOTIFICATION**

**Section A:** Complete the following information for the failed lot and send the original to the Administrative Committee for Pistachios office within 10 days of test completion. Provide a copy to the Handler for their records.

Lot description: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Lot ID marks: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Weight: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Lbs. Container size/description: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Handler of the product: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ State: \_\_\_\_ Zip Code:\_\_\_\_\_

Sampled by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Of (Agency) \_\_\_\_\_\_\_\_\_\_\_\_

**Section B:** To be completed by the Handler. Record whether lot failed minimum quality and the certificate number.

Did lot fail minimum quality standard? Yes: \_\_\_\_ No: \_\_\_\_ Certificate No.: \_\_\_\_\_\_\_\_\_\_\_\_

**Section C:** To be completed by the Aflatoxin Testing Laboratory. Record whether lot failed aflatoxin and the certificate number. Record the aflatoxin results and averages.

Did lot fail aflatoxin test requirement? Yes: \_\_\_\_ No: \_\_\_\_ Certificate No.: \_\_\_\_\_\_\_\_\_\_\_\_

Result for Test 1: \_\_\_\_\_\_\_\_\_ Result for Test 2: \_\_\_\_\_\_\_\_ Average result: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (Average of Test 1 and 2)

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Form Initiator: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Company: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City: \_\_\_\_\_\_\_\_\_\_ State: \_\_\_\_\_\_ Zip Code: \_\_\_\_\_\_\_

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