



Produce GAPs Harmonized Food Safety Standard USDA Checklist

AUDITEE INFORMATION

Company Name: _____

Audited Location Address _____ GPS (Optional): _____

Street: _____ City, State, Zip: _____

Multiple sites covered by this audit? (If Yes, provide details in Additional Comments) Yes No

Mailing/Business Address Same as above

Street: _____ City, State, Zip: _____

Company Contact: _____ Contact Title: _____

Phone Number: _____ Fax Number: _____

E-Mail Address: _____

Company uses USDA GAP&GHP Logo on packaging or marketing materials? Yes No

AUDIT INFORMATION

Date and Time of Audit Beginning Date: _____ Time: _____

Ending Date: _____ Time: _____

Description of Operation: _____

Harvest Company Name (if applicable): _____

Other Contractors: _____

Commodities Covered by Audit: _____

Commodities Produced During Audit: _____

Total Acres Covered by Audit: _____

AUDIT SCOPE: (Please check all scopes audited)

General Questions (All audits must begin with and pass this portion)

Field Operations and Harvesting.....

Post-Harvest Operations.....

Logo Use

AUDITOR INFORMATION

United States Department of Agriculture
 Agricultural Marketing Service
 Specialty Crops Program
 Specialty Crops Inspection Division

Field Office: _____

Auditor Name(s): _____

Auditor Signature(s): _____

OTHER INFORMATION

| | |
|--|--|
| Person(s) Interviewed: | |
| Audit Requested by: | |
| Distribute Audit Report to*(if known): | |

*Supplying names of retail and food service buyers is not mandatory, however it is useful to know in the event the buyer requires USDA-AMS to send a copy of the audit report directly. No audit results are sent to a 3rd party without the written consent of the auditee.

ADDITIONAL COMMENTS**INTERNAL USE ONLY**

Reviewing Official Name: _____

Signature: _____

Date: _____

Audit Results Meets USDA
Acceptance Criteria Yes No

AUDITOR COMPLETION INSTRUCTIONS

All questions on the Produce GAPs Harmonized Food Safety Standard - USDA Checklist shall be assessed according to the Verification Instructions outlined in the Produce GAPs Harmonized Food Safety Standard. Auditors shall have a copy of the Standard with them when performing audits to verify questions are assessed appropriately. All questions shall be assessed using one of the following:

Compliant (C) - The operation meets the requirements of the Produce GAPs Harmonized Food Safety Standard.

Corrective Action Needed (CAN) - The operation does not meet the requirement(s) of the Produce GAPs Harmonized Food Safety Standard, however the non-conformance is not considered to be an immediate food safety risk.

Immediate Action Required (IAR) - The operation does not meet the requirement(s) of the Produce GAPs Harmonized Food Safety Standard and the non-conformance is considered an imminent food safety risk. An imminent food safety risk is present when produce is grown, processed, packed or held under conditions that promote or cause the produce to become contaminated. Observation of employee practices (personal or hygienic) that jeopardize, or may jeopardize, the safety of the produce are considered an "IAR". The presence or evidence of rodents and an excessive amount of insects or pests are also considered an "IAR".

Not Applicable (N/A) - The question is not applicable to the operation.

Auditor Comments: The auditor shall document the findings associated with any question answered "CAN" or "IAR" in the auditor comment section of the checklist. Auditors may also document observations associated with any question on the checklist whether or not the question is a non-conformity if the explanation clarifies why a question was answered compliant. The auditor shall write a comment for each question answered "N/A" addressing why the question was answered "N/A".

Tallying the Audit: Once the auditor finishes the audit, the score sheet shall be filled out by recording the number of C, CAN, IAR, and NA's for each section of the audit. The question number of any question answered as CAN or IAR for each section shall be noted in the last column of the score sheet.

Corrective Action Reports: The auditor shall fill out a Corrective Action Report for each question that has been answered "CAN" or "IAR". Auditor shall refer to the *GAP&GHP Audit Verification Program - Policy and Instructions* for further guidance on Corrective Action Reports.

Auditee Information

Auditees should download the complete Produce GAPs Harmonized Food Safety Standard which provides more complete & detailed information regarding the specific questions covered by this audit checklist. The complete Standard is available on the USDA website at www.ams.usda.gov/gapghp.

The acceptance criteria to meet USDA-AMS requirements are outlined on the Audit Summary Page, however be aware that depending on who the client(s) requiring the audit are, their specific acceptance criteria may vary from the USDA-AMS criteria.

It is intended that the scopes of the audit selected are completed in their entirety and the audit not restricted to one specific section. However, at the auditees request, the audit may be split to accommodate scheduling; however, if this is done, the audit is not complete and no certificate or web posting will be issued until the audit is finalized.

To schedule an audit, please go to the USDA-AMS website at www.ams.usda.gov/gapghp and click on the "Request an Audit" link. This will list out the local contacts across the country who can be contacted to schedule an audit. For auditees without internet access, please contact your local Federal or Federal-State Specialty Crops Inspection office, or the Audit Services Branch at 202-720-5021.

**USDA Acceptance Criteria for the
Produce GAPs Harmonized Food Safety Standard Audit**

| | |
|---|--|
| 1 | No questions are assessed as an "IAR", Immediate Action Required. |
| 2 | Falsification of records is considered an "IAR". |
| 3 | "compliant". |
| 4 | Operation must have performed all risk assessments, designated with an "A" in the DOC column, in the Produce GAPs Harmonized Food Safety Standard. |
| 5 | If the auditee has been audited against the Produce GAPs Harmonized Food Safety Standard previously, the auditee must have addressed all associated CANs or IARs, following their established corrective action procedure. |
| 6 | In each major section (G, F, and P) of the audit, at least 80% of the questions not answered as "N/A" must be answered as compliant. |

If an operation meets the acceptance criteria as outlined above, the operation will receive a certificate stating its conformance to Produce GAPs Harmonized Food Safety Standard as well as being posted to the USDA website. Corrective action reports will still be supplied to the auditee for all nonconformances.

If an operation does not meet the acceptance criteria as outlined above, a corrective action report form will be issued for each nonconformance noted on the audit. The operation has the opportunity to take measures in order to address the issue and schedule a new audit in order to show compliance to the acceptance criteria.

| Audit Summary | | Name of Auditee: | | | | | Question # of any CAN or IAR |
|---------------|---|--------------------|--------|----------|----------|---------|------------------------------|
| | | Date of audit: | | | | | |
| Section | Questions | Total # in Section | # of C | # of CAN | # of IAR | # of NA | |
| G | General Questions | 44 | | | | | |
| G-1 | Management Responsibility | 3 | | | | | |
| G-2 | Food Safety Plan | 3 | | | | | |
| G-3 | Documentation & Recordkeeping | 3 | | | | | |
| G-4 | Worker Education & Training | 3 | | | | | |
| G-5 | Sampling & Testing | 4 | | | | | |
| G-6 | Traceability | 2 | | | | | |
| G-7 | Recall Program | 1 | | | | | |
| G-8 | Corrective Actions | 1 | | | | | |
| G-9 | Self Audits | 1 | | | | | |
| G-10 | Worker Health/Hygiene and Toilet/Handwashing Facilities | 21 | | | | | |
| G-11 | Waste Management | 2 | | | | | |
| F | Field Operations and Harvesting | 51 | | | | | |
| F-1 | Field History & Assessment | 3 | | | | | |
| F-2 | Agricultural Chemicals/Plant Protection Products | 5 | | | | | |
| F-3 | Water System Description | 3 | | | | | |
| F-4 | Water System Risk Assessment | 1 | | | | | |
| F-5 | Water Management Plan | 6 | | | | | |
| F-6 | Animal Control | 3 | | | | | |
| F-7 | Soil Amendments | 2 | | | | | |
| F-8 | Vehicles, Equipment, Tools and Utensils | 6 | | | | | |

| Audit Summary | | Name of Auditee: | | | | | Question # of any CAN or IAR |
|---------------|---|--------------------|--------|----------|----------|---------|------------------------------|
| | | Date of audit: | | | | | |
| Section | Questions | Total # in Section | # of C | # of CAN | # of IAR | # of NA | |
| F-9 | Preharvest Assessment | 1 | | | | | |
| F-10 | Water/Ice Used in the Harvesting and Postharvest Operations | 5 | | | | | |
| F-11 | Containers, Bins and Packaging Materials | 4 | | | | | |
| F-12 | Field Packaging and Handling | 7 | | | | | |
| F-13 | Postharvest Handling and Storage (Field Prior to Storage or Packinghouse) | 3 | | | | | |
| F-14 | Equipment Sanitation & Maintenance | 2 | | | | | |
| P | Post-Harvest Operations | 62 | | | | | |
| P-1 | Produce Sourcing | 1 | | | | | |
| P-2 | Agricultural Chemicals | 3 | | | | | |
| P-3 | Facility | 6 | | | | | |
| P-4 | Pest and Animal Control | 3 | | | | | |
| P-5 | Equipment, Tools and Utensils | 5 | | | | | |
| P-6 | Maintenance and Sanitation | 11 | | | | | |
| P-7 | Post-Harvest Water/Ice | 11 | | | | | |
| P-8 | Containers, Bins and Packaging | 7 | | | | | |
| P-9 | Storage | 9 | | | | | |
| P-10 | Transportation (Packinghouse to Customer) | 6 | | | | | |

| Audit Summary | | Name of Auditee: | | | | | Question # of any CAN or IAR |
|---|------------------------------------|--------------------|--------|----------|----------|---------|------------------------------|
| | | Date of audit: | | | | | |
| Section | Questions | Total # in Section | # of C | # of CAN | # of IAR | # of NA | |
| L | Logo Use | 10 | | | | | |
| L-1 | Food Safety Plan or Quality Manual | 2 | | | | | |
| L-2 | Traceability and Recall Programs | 1 | | | | | |
| L-3 | Approved Suppliers | 3 | | | | | |
| L-4 | GAP & GHP Logo Approved Use | 4 | | | | | |
| C, Compliant with requirement; CAN, Corrective action needed to address nonconformance; IAR, Immediate action required because of imminent food safety risk; N/A, not applicable or not needed. | | | | | | | |

| Name of Auditee: | | | | | | | | |
|--------------------------|---|-----|-----|---|-----|-----|----|------------------|
| Date of Audit: | | | | | | | | |
| Req. # | Requirement | DOC | MAN | C | CAN | IAR | NA | Auditor Comments |
| General Questions | | | | | | | | |
| G-1 | Management Responsibility | | | | | | | |
| G-1.1 | A food safety policy shall be in place. | WP | • | | | | | |
| G-1.2 | Management has designated individual(s) with roles, responsibilities, and resources for food safety functions. | WP | • | | | | | |
| G-1.3 | There is a disciplinary policy for food safety violations. | | | | | | | |
| G-2 | Food Safety Plan or Risk Assessment | | | | | | | |
| G-2.1. | There shall be a written food safety plan that covers the Operation. The plan shall cover the Operation. The Operation and products covered shall be defined. | WP | • | | | | | |
| G-2.2 | The food safety plan shall be reviewed at least annually. | R | | | | | | |
| G-2.3* | Operation has an Approved Supplier program for all incoming materials, including packaging. | R | • | | | | | |

| Name of Auditee: | | | | | | | | |
|------------------|--|-----|-----|---|-----|-----|----|------------------|
| Date of Audit: | | | | | | | | |
| Req. # | Requirement | DOC | MAN | C | CAN | IAR | NA | Auditor Comments |
| G-3 | Documentation and Recordkeeping | | | | | | | |
| G-3.1 | Documentation shall be kept that demonstrates the food safety plan is being followed. | R | • | | | | | |
| G-3.2. | Documentation shall be readily available for inspection. | | • | | | | | |
| G-3.3. | Documentation shall be retained for a minimum period of two years, or as required by prevailing regulations. | R | • | | | | | |
| G-4 | Worker Education and Training | | | | | | | |
| G-4.1. | All personnel shall receive food safety training. | R | • | | | | | |
| G-4.2. | Personnel with food safety responsibilities shall receive training sufficient to their responsibilities. | R | • | | | | | |
| G-4.3. | Contracted personnel are held to the relevant food safety standards as they would be as employees. | R | • | | | | | |

| Name of Auditee: | | | | | | | | |
|------------------|--|-----|-----|---|-----|-----|----|------------------|
| Date of Audit: | | | | | | | | |
| Req. # | Requirement | DOC | MAN | C | CAN | IAR | NA | Auditor Comments |
| G-5 | Sampling and Testing | | | | | | | |
| G-5.1 | Where laboratory analysis is required in the Food Safety Plan, testing shall be performed by a GLP laboratory using validated methods. | R | | | | | | |
| G-5.2 | Where microbiological analysis is required in the Food Safety Plan, samples shall be collected in accordance with an established sampling procedure. | WP | | | | | | |
| G-5.3 | Tests, their results and actions taken must be documented. | R | | | | | | |
| G-5.4 | All required testing shall include test procedures and actions to be taken based on the results. | WP | • | | | | | |

| Name of Auditee: | | | | | | | | |
|------------------|--|----------|-----|---|-----|-----|----|------------------|
| Date of Audit: | | | | | | | | |
| Req. # | Requirement | DOC | MAN | C | CAN | IAR | NA | Auditor Comments |
| G-6 | Traceability | | | | | | | |
| G-6.1 | A documented traceability program shall be established. | WP, R | • | | | | | |
| G-6.2 | A trace back and trace forward exercise shall be performed at least annually. | R | | | | | | |
| G-7 | Recall Program | | | | | | | |
| G-7.1. | A documented recall program, including written procedures, shall be established. | WP, R | • | | | | | |
| G-8 | Corrective Actions and Food Safety Incidents | | | | | | | |
| G-8.1 | The Operation shall have documented corrective action procedures. | WP, R | • | | | | | |
| G-9 | Self Audits | | | | | | | |
| G-9.1. | The Operation shall have documented self-audit procedures. | R | | | | | | |

| Name of Auditee: | | | | | | | | |
|------------------|--|-----|-----|---|-----|-----|----|------------------|
| Date of Audit: | | | | | | | | |
| Req. # | Requirement | DOC | MAN | C | CAN | IAR | NA | Auditor Comments |
| G-10 | Worker Health/Hygiene and Toilet/Handwashing Facilities | | | | | | | |
| G-10.1 | Operation shall have a policy for toilet, hygiene, and health. | WP | • | | | | | |
| G-10.2 | Employees and visitors shall be made aware of and follow all personal hygiene practices as designated by the Operation. | | • | | | | | |
| G-10.3 | Toilet facilities and restrooms shall be designed, constructed, and located in a manner that minimizes the potential risk for product contamination and are directly accessible for servicing. | | • | | | | | |
| G-10.4 | Toilet facilities shall be of adequate number, easily accessible to employees and visitors and in compliance with applicable regulations. | | • | | | | | |
| G-10.5 | The practice of disposing of used toilet tissue on the floor, in trash receptacles or in boxes is prohibited. | | • | | | | | |

| Name of Auditee: | | | | | | | | |
|------------------|---|-----|-----|---|-----|-----|----|------------------|
| Date of Audit: | | | | | | | | |
| Req. # | Requirement | DOC | MAN | C | CAN | IAR | NA | Auditor Comments |
| G-10.6 | Toilet and wash stations shall be maintained in a clean and sanitary condition. | R | • | | | | | |
| G-10.7 | Personnel shall wash their hands at any time when their hands may be a source of contamination. | | • | | | | | |
| G-10.8 | Signage requiring handwashing is posted. | | | | | | | |
| G-10.9 | Clothing, including footwear, shall be effectively maintained and worn so as to protect product from risk of contamination. | | • | | | | | |
| G-10.10 | If gloves are used, the Operation shall have a glove use policy. | | • | | | | | |

| Name of Auditee: | | | | | | | | |
|------------------|--|-----|-----|---|-----|-----|----|------------------|
| Date of Audit: | | | | | | | | |
| Req. # | Requirement | DOC | MAN | C | CAN | IAR | NA | Auditor Comments |
| G-10.11 | If protective clothing is required by the Operation in product handling areas, it shall be handled in a manner to protect against contamination. When appropriate, racks and/or storage area for protective clothing and tools is used by employees shall be provided. | | | | | | | |
| G-10.12 | The wearing of jewelry, body piercings and other loose objects (e.g. false nails) shall be in compliance to the company policy and applicable regulation. | | | | | | | |
| G-10.13 | The use of hair coverings shall be in compliance to company policy and applicable regulation. | | | | | | | |
| G-10.14 | Employees' personal belongings shall be stored in designated areas. | | | | | | | |

| Name of Auditee: | | | | | | | | |
|------------------|--|-----|-----|---|-----|-----|----|------------------|
| Date of Audit: | | | | | | | | |
| Req. # | Requirement | DOC | MAN | C | CAN | IAR | NA | Auditor Comments |
| G-10.15 | Smoking, eating, chewing gum or tobacco, drinking (other than water) urinating, defecating or spitting shall be prohibited except in clearly designated areas. | | • | | | | | |
| G-10.16 | Operation shall have a written policy that break areas are located so as not to be a source of product contamination. | WP | | | | | | |
| G-10.17 | Drinking water shall be available to all employees. | R | | | | | | |
| G-10.18 | Workers and visitors who show signs of illness shall be restricted from direct contact with produce or food contact surfaces. | WP | • | | | | | |
| G-10.19 | Personnel with exposed cuts, sores or lesions shall not be engaged in handling product. | | • | | | | | |
| G-10.20 | Operation shall have a blood and bodily fluids policy. | WP | • | | | | | |
| G-10.21 | First aid kits shall be accessible to all personnel. | | | | | | | |

| Name of Auditee: | | | | | | | | |
|------------------|--|-----|-----|---|-----|-----|----|------------------|
| Date of Audit: | | | | | | | | |
| Req. # | Requirement | DOC | MAN | C | CAN | IAR | NA | Auditor Comments |
| G-11 | Waste Management | | | | | | | |
| G-11.1 | Operation has implemented a waste management plan. | | • | | | | | |
| G-11.2 | Trash shall not come in contact with produce. | | • | | | | | |

Code Key: A=Assessment of Risk; WP = Written Policy/Procedure/Plan; R = Record

| |
|-------------------------------------|
| Additional Auditor Comments: |
| |

| Name of Auditee: | | | | | | | | |
|------------------|---|-----|-----|---|-----|-----|----|------------------|
| Date of Audit: | | | | | | | | |
| Req. # | Requirement | DOC | MAN | C | CAN | IAR | NA | Auditor Comments |
| | Field Operations and Harvesting | | | | | | | |
| F-1 | Field History and Assessment | | | | | | | |
| F-1.1 | The food safety plan shall, initially and at least annually thereafter, evaluate and document the risks associated with land use history and adjacent land use, including equipment and structures. | A | • | | | | | |
| F-1.2 | For indoor growing and field storage buildings, building shall be constructed and maintained in a manner that prevents contamination of produce. | | • | | | | | |
| F-1.3 | Sewage or septic systems are maintained so as not to be a source of contamination. | | • | | | | | |
| F-2 | Agricultural Chemicals/Plant Protection Products | | | | | | | |
| F-2.1 | Use of agricultural chemicals shall comply with label directions and prevailing regulation. | R | • | | | | | |

| Name of Auditee: | | | | | | | | |
|------------------|---|-----|-----|---|-----|-----|----|------------------|
| Date of Audit: | | | | | | | | |
| Req. # | Requirement | DOC | MAN | C | CAN | IAR | NA | Auditor Comments |
| F-2.2 | If product is intended for export, agricultural chemical use, including post-harvest chemicals, shall consider requirements in the intended country of destination. | | | | | | | |
| F-2.3 | Agricultural chemicals shall be applied by trained, licensed or certified application personnel, as required by prevailing regulation. | R | | | | | | |
| F-2.4 | Water used with agricultural chemicals shall not be a source of product or field contamination. | R | | | | | | |
| F-2.5 | Agricultural chemical disposal shall not be a source of product or field contamination. | R | | | | | | |
| F-3 | Water System Description | | | | | | | |
| F-3.1 | A water system description shall be available for review. | WP | • | | | | | |
| F-3.2 | The water source shall be in compliance with prevailing regulations. | | | | | | | |

| Name of Auditee: | | | | | | | | |
|------------------|---|-----|-----|---|-----|-----|----|------------------|
| Date of Audit: | | | | | | | | |
| Req. # | Requirement | DOC | MAN | C | CAN | IAR | NA | Auditor Comments |
| F-3.3 | Water systems shall not be cross-connected with human or animal waste systems. | | • | | | | | |
| F-4 | Water System Risk Assessment | | | | | | | |
| F-4.1 | An initial risk assessment shall be performed and documented that takes into consideration the historical testing results of the water source, the characteristics of the crop, the stage of the crop, and the method of application. | A | • | | | | | |
| F-5 | Water Management Plan | | | | | | | |
| F-5.1 | There shall be a water management plan to mitigate risks associated with the water system on an ongoing basis. | WP | • | | | | | |
| F-5.2 | Water testing shall be part of the water management plan, as directed by the water risk assessment and current industry standards or prevailing regulations for the commodities being grown. | WP | • | | | | | |

| Name of Auditee: | | | | | | | | |
|------------------|---|-----|-----|---|-----|-----|----|------------------|
| Date of Audit: | | | | | | | | |
| Req. # | Requirement | DOC | MAN | C | CAN | IAR | NA | Auditor Comments |
| F-5.3 | The testing program shall be implemented consistent with the water management plan. | R | • | | | | | |
| F-5.4 | If water is treated to meet microbiological criteria, the treatment is approved and effective for its intended use, and is appropriately monitored. | R | • | | | | | |
| F-5.5 | If post-harvest handling is used to achieve microbial criteria, Operation has documentation supporting its use. | R | • | | | | | |
| F-5.6 | If Operation uses an alternative approach to regulatory microbiological testing, Operation has scientific data or information to support the alternative. | R | • | | | | | |
| F-6 | Animal Control | | | | | | | |
| F-6.1 | The Operation has a written risk assessment on animal activity in and around the production area. | A | • | | | | | |

| Name of Auditee: | | | | | | | | |
|------------------|---|----------|-----|---|-----|-----|----|------------------|
| Date of Audit: | | | | | | | | |
| Req. # | Requirement | DOC | MAN | C | CAN | IAR | NA | Auditor Comments |
| F-6.2 | The Operation routinely monitors for animal activity in and around the growing area during the growing season. | R | • | | | | | |
| F-6.3 | Based on the risk assessment, there shall be measures to prevent or minimize the potential for contamination from animals, including domesticated animals used in farming operations. | WP, R | • | | | | | |
| F-7 | Soil Amendments | | | | | | | |
| F-7.1 | The food safety plan shall address soil amendment risk, preparation, use, and storage. | A, R | • | | | | | |
| F-7.2 | If a soil amendment containing raw or incompletely treated manure is used, it shall be used in a manner so as not to serve as a source of contamination of produce. | R | • | | | | | |

| Name of Auditee: | | | | | | | | |
|------------------|---|-------|-----|---|-----|-----|----|------------------|
| Date of Audit: | | | | | | | | |
| Req. # | Requirement | DOC | MAN | C | CAN | IAR | NA | Auditor Comments |
| F-8 | Vehicles, Equipment, Tools and Utensils | | | | | | | |
| F-8.1 | Equipment, vehicles, tools utensils and other items or materials used in farming operations that may contact produce are identified. | R | | | | | | |
| F-8.2 | Equipment, vehicles, tools and utensils used in farming operations which come into contact with product are in good repair, and are not a source of contamination of produce. | WP, R | • | | | | | |
| F-8.3 | Vehicles, equipment, tools and utensils shall be controlled so as not to be a source of chemical hazards. | WP | | | | | | |
| F-8.4 | Vehicles, equipment, tools and utensils shall be controlled so as not to be a source of physical hazards. | | | | | | | |
| F-8.5 | Cleaning and sanitizing procedures do not pose a risk of product contamination. | | | | | | | |

| Name of Auditee: | | | | | | | | |
|-------------------|--|-------|-----|---|-----|-----|----|------------------|
| Date of Audit: | | | | | | | | |
| Req. # | Requirement | DOC | MAN | C | CAN | IAR | NA | Auditor Comments |
| F-8.6 | Water tanks are cleaned at a sufficient frequency so as not to be a source of contamination. | WP | • | | | | | |
| Harvesting | | | | | | | | |
| F-9 | Preharvest Assessment | | | | | | | |
| F-9.1 | A preharvest risk assessment shall be performed. | A | • | | | | | |
| F-10 | Water/Ice Used in the Harvesting and Postharvest Operations | | | | | | | |
| F-10.1 | Operation has procedures for water used in contact with product or food contact surfaces. | WP, R | • | | | | | |
| F-10.2 | Water use SOPs address the microbial quality of water or ice that directly contacts the harvested crop or is used on food- contact surfaces. | R | • | | | | | |
| F-10.3 | Water use SOPs address treatment of re-circulated water, if used. | R | • | | | | | |
| F-10.4 | Water use SOPs address condition and maintenance of water-delivery system. | R | • | | | | | |

| Name of Auditee: | | | | | | | | |
|------------------|---|-----|-----|---|-----|-----|----|------------------|
| Date of Audit: | | | | | | | | |
| Req. # | Requirement | DOC | MAN | C | CAN | IAR | NA | Auditor Comments |
| F-10.5 | If applicable to the specific commodity, water use SOPs address control of wash water temperature. | R | | | | | | |
| F-11 | Containers, Bins and Packaging Materials | | | | | | | |
| F-11.1 | Operation has written policy regarding storage of harvesting containers. | WP | | | | | | |
| F-11.2 | Operation has written policy regarding inspection of food contact containers prior to use. | WP | | | | | | |
| F-11.3 | Operation has written policy regarding acceptable harvesting containers. | WP | • | | | | | |
| F-11.4. | Operation has written policy prohibiting use of harvest containers for non-harvest purposes. | WP | • | | | | | |
| F-12 | Field Packing and Handling | | | | | | | |
| F-12.1 | Operation shall have a written policy that visibly contaminated, damaged or decayed produce is not harvested, or is culled. | WP | • | | | | | |

| Name of Auditee: | | | | | | | | |
|------------------|--|-----|-----|---|-----|-----|----|------------------|
| Date of Audit: | | | | | | | | |
| Req. # | Requirement | DOC | MAN | C | CAN | IAR | NA | Auditor Comments |
| F-12.2 | Product that contacts the ground shall not be harvested unless the product normally grows in contact with the ground. | WP | • | | | | | |
| F-12.3 | Harvest procedures shall include measures to inspect for and remove physical hazards. | | | | | | | |
| F-12.4 | Cloths, towels, or other cleaning materials that pose a risk of cross-contamination shall not be used to wipe produce. | | | | | | | |
| F-12.5 | Packaging materials shall be appropriate for their intended use. | | • | | | | | |
| F-12.6 | Packaging shall be stored in a manner that prevents contamination. | | | | | | | |
| F-12.7 | Operation has written policy regarding whether packing materials are permitted in direct contact with the soil. | WP | | | | | | |

| Name of Auditee: | | | | | | | | |
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| Date of Audit: | | | | | | | | |
| Req. # | Requirement | DOC | MAN | C | CAN | IAR | NA | Auditor Comments |
| F-13 | Postharvest Handling and Storage (Field Prior to Storage or Packinghouse) | | | | | | | |
| F-13.1 | Harvested produce is handled in a manner such that it is not likely to become contaminated. | | • | | | | | |
| F-13.2 | Materials that come in contact with the produce shall be clean and in good repair. | | • | | | | | |
| F-13.3 | Harvested produce shall be stored separately from chemicals which may pose a food safety hazard. | | • | | | | | |
| | Transportation (Field to Storage or Packinghouse) | | | | | | | |
| F-14 | Equipment Sanitation and Maintenance | | | | | | | |
| F-14.1 | The Operation shall have a policy, written procedures, and a checklist to verify cleanliness and functionality of shipping units (e.g., trailer). | WP, R | • | | | | | |
| F-14.2 | Loading/unloading procedures and equipment shall minimize damage to and prevent contamination of produce. | | | | | | | |

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Code Key: A=Assessment of Risk; WP = Written Policy/Procedure/Plan; R = Record

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| Req. # | Requirement | DOC | MAN | C | CAN | IAR | NA | Auditor Comments |
| | Post-Harvest Operations | | | | | | | |
| P-1 | Produce Sourcing | | | | | | | |
| P-1.1 | The Operation has a policy and takes affirmative steps to ensure that all fresh produce that are packed or stored in the Operation are grown following requirements in <i>Field Operations and Harvesting</i> harmonized standard. | R | | | | | | |
| P-2 | Agricultural Chemicals | | | | | | | |
| P-2.1 | Use of agricultural chemicals shall comply with label directions and prevailing regulation. | R | • | | | | | |
| P-2.2 | If product is intended for export, pre- and post-harvest agricultural chemical use shall consider requirements in the intended country of destination. | | | | | | | |
| P-2.3 | Agricultural chemicals shall be applied by trained, licensed or certified application personnel, as required by prevailing regulation. | R | | | | | | |

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| Req. # | Requirement | DOC | MAN | C | CAN | IAR | NA | Auditor Comments |
| P-3 | Facility | | | | | | | |
| P-3.1 | Building shall be constructed and maintained in a manner that prevents contamination of produce during staging and cooling. | | • | | | | | |
| P-3.2 | Adequate lighting shall be provided in all areas. | | | | | | | |
| P-3.3 | Only essential glass and brittle plastic shall be present in the building. | R | | | | | | |
| P-3.4 | Catwalks above product zones are protected to prevent produce or packaging contamination. | | | | | | | |
| P-3.5 | Operation has procedures to prevent pest harborage in any equipment stored near the building. | | | | | | | |
| P-3.6 | If applicable, Operation has a written Allergen Control Program. | A, WP | • | | | | | |
| P-4 | Pest and Animal Control | | | | | | | |
| P-4.1 | Operation has procedures to manage pests to the extent appropriate to the Operation. | WP | • | | | | | |

| Name of Auditee: | | | | | | | | |
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| Req. # | Requirement | DOC | MAN | C | CAN | IAR | NA | Auditor Comments |
| P-4.2 | Operation restricts animals from food handling areas. | | • | | | | | |
| P-4.3 | If used, pest control devices, including rodent traps and electrical flying insect devices are located so as to not contaminate produce or food handling surfaces. | | | | | | | |
| P-5 | Equipment, Tools and Utensils | | | | | | | |
| P-5.1 | All food contact equipment, tools and utensils are designed and made of materials that are easily cleaned and maintained. | | • | | | | | |
| P-5.2 | Equipment is installed in a way that provides access for cleaning. | | | | | | | |
| P-5.3 | Equipment lubrication is managed so as not to contaminate food products. | | | | | | | |

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| Req. # | Requirement | DOC | MAN | C | CAN | IAR | NA | Auditor Comments |
| P-5.4 | All instruments used to measure temperature, pH, antimicrobial levels and or other important devices used to monitor requirements in this section shall be adequately maintained and calibrated at a frequency sufficient to assure continuous accuracy. | R | • | | | | | |
| P-5.5 | Foreign material control devices are inspected and maintained. | R | | | | | | |
| P-6 | Maintenance and Sanitation | | | | | | | |
| P-6.1 | A Preventive Maintenance and/or Master Cleaning Schedule, with related SOPs, shall be established. | WP, R | • | | | | | |
| P-6.2 | Any temporary repairs on food contact surfaces are constructed of food-grade material. Operation has a procedure to ensure that permanent repairs are implemented in a timely manner. | | | | | | | |

| Name of Auditee: | | | | | | | | |
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| Req. # | Requirement | DOC | MAN | C | CAN | IAR | NA | Auditor Comments |
| P-6.3 | All cleaning agents shall be approved for their intended use on food contact surfaces. | | | | | | | |
| P-6.4 | Cleaning equipment and tools are clean, in working order and stored properly away from product handling areas. | | | | | | | |
| P-6.5 | Food contact surfaces shall be cleaned, sanitized and maintained according to the Food Safety Plan. | R | • | | | | | |
| P-6.6 | Transporting equipment shall be maintained to prevent contamination of products being transported. | R | • | | | | | |
| P-6.7 | Waste materials and their removal are managed to avoid contamination. | | • | | | | | |
| P-6.8 | Outside garbage receptacles/dumpsters are closed and located away from building entrances and the area around such sites is reasonably clean. | | | | | | | |

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| Req. # | Requirement | DOC | MAN | C | CAN | IAR | NA | Auditor Comments |
| P-6.9 | The plant grounds are reasonably free of litter, waste culls, vegetation, debris and standing water. | | | | | | | |
| P-6.10 | Sewage or septic systems are maintained so as not to be a source of contamination. | | • | | | | | |
| P-6.11 | The sewage disposal system is adequate for the process and maintained to prevent direct or indirect product contamination. | | • | | | | | |
| P-7 | Post-Harvest Water/Ice | | | | | | | |
| P-7.1 | A water system description shall be prepared. | R | • | | | | | |
| P-7.2 | Documented scheduled assessment of water system including delivery equipment shall be performed. | R | • | | | | | |
| P-7.3 | Water use SOPs address the microbial quality of water or ice that directly contacts the harvested crop or is used on food-contact surfaces. | R | • | | | | | |
| P-7.4 | Operation's Food Safety Plan includes produce washing process, if used. | A, WP | • | | | | | |

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| Req. # | Requirement | DOC | MAN | C | CAN | IAR | NA | Auditor Comments |
| P-7.5 | If used, water antimicrobial treatments shall be monitored sufficiently to assure continuous control. | R | • | | | | | |
| P-7.6 | Re-circulated water that contacts product or food contact surfaces shall be treated using an approved antimicrobial process or chemical treatment. | | • | | | | | |
| P-7.7 | Operation has documentation demonstrating regulatory approval of the wash water antimicrobials in use. | R | | | | | | |
| P-7.8 | If wash water antimicrobial is used, it shall be used in accordance with established operational procedure and manufacturer instructions. | R | | | | | | |
| P-7.9 | If applicable to the specific commodity, water use SOPs address control of immersion water temperature. | R | | | | | | |
| P-7.10 | Water-change schedules shall be developed for all uses of water where water is re-used. | | | | | | | |

| Name of Auditee: | | | | | | | | |
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| Date of Audit: | | | | | | | | |
| Req. # | Requirement | DOC | MAN | C | CAN | IAR | NA | Auditor Comments |
| P-7.11 | Debris, damaged and/or visibly contaminated produce shall be removed from wash areas/dump tanks to the extent possible. | | | | | | | |
| P-8 | Containers, Bins and Packaging | | | | | | | |
| P-8.1 | Specifications for all packaging materials that impact on finished product safety shall be provided and comply with prevailing regulations. | R | | | | | | |
| P-8.2 | Operation has written policy regarding storage and post-storage handling of product-contact containers. | WP | | | | | | |
| P-8.3 | Operation has written policy regarding whether product-contact containers are permitted in direct contact with the ground. | WP | | | | | | |
| P-8.4 | Operation has written policy regarding inspection of food contact containers and bins prior to use. | WP | | | | | | |

| Name of Auditee: | | | | | | | | |
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| Req. # | Requirement | DOC | MAN | C | CAN | IAR | NA | Auditor Comments |
| P-8.5 | Operation has written policy regarding acceptable product-contact containers. | WP | • | | | | | |
| P-8.6 | Operation has written policy prohibiting use of product-contact containers for non-product purposes unless clearly marked or labeled for that purpose. | WP | | | | | | |
| P-8.7 | Pallets shall be kept clean and in good condition as appropriate for their intended use. | | | | | | | |
| P-9 | Storage | | | | | | | |
| P-9.1 | Product storage areas and conditions shall be appropriate to the commodities stored. | | | | | | | |
| P-9.2 | Iced produce is handled so as not to serve as a source of contamination. | | | | | | | |
| P-9.3 | Non-product storage areas shall be maintained so as not to be a source of product or materials contamination. | | | | | | | |

| Name of Auditee: | | | | | | | | |
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| Req. # | Requirement | DOC | MAN | C | CAN | IAR | NA | Auditor Comments |
| P-9.4 | Materials and packaging materials shall be protected from contaminants. | | | | | | | |
| P-9.5 | Adequate space shall be maintained between rows of stored materials to allow cleaning and inspection. | WP | | | | | | |
| P-9-6 | All chemicals shall be stored in a secure separate area. All chemicals shall be properly labeled. | | | | | | | |
| P-9.7 | When produce is cooled, it is cooled to temperatures appropriate to the commodity according to current established regulatory or industry standards. | R | | | | | | |
| P-9.8 | Where temperature control is required for food safety, cooling facilities shall be fitted with temperature monitoring equipment or suitable temperature monitoring device. | R | | | | | | |

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| P-9.9 | Cooling equipment shall be maintained so as not to be a source of product contamination. | | • | | | | | |
| P-10 | Transportation (Packinghouse to Customer) | | | | | | | |
| P-10.1 | There is a written policy for transporters and conveyances to maintain a specified temperature(s) during transit. | WP | | | | | | |
| P-10.2 | Prior to loading, the vehicle shall be pre-cooled. | WP, R | | | | | | |
| P-10.3 | The refrigerated transport vehicles shall have properly maintained and fully functional refrigeration equipment. | WP | | | | | | |
| P-10.4 | Where required, temperatures of product are taken and recorded prior to or upon loading. | WP | | | | | | |
| P-10.5 | The Operation shall have a policy, written procedures, and a checklist to verify cleanliness and functionality of shipping units (e.g., trailer). | WP, R | • | | | | | |

| Name of Auditee: | | | | | | | | |
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| Req. # | Requirement | DOC | MAN | C | CAN | IAR | NA | Auditor Comments |
| P-10.6 | Loading/unloading procedures and equipment shall minimize damage to and prevent contamination of produce. | | | | | | | |

Code Key: A=Assessment of Risk; WP = Written Policy/Procedure/Plan; R = Record

Additional Auditor Comments:

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| Name of Auditee: | |
| Date of Audit: | |

Note: An official identification logo has been developed in conjunction with the USDA GAP & GHP program which may be used to indicate participation in the program. Participants may use the logo, provided they meet the requirements of the USDA logo use instructions found at www.ams.usda.gov/gapghp and meet the requirements of this audit. Failure to meet the audit will result in steps taken in accordance with the USDA logo use instructions.

The USDA Logo Use Addendum acceptance criteria is as follows:

- 1 No questions are assessed as an "IAR", Immediate Action Required.
- 2 Falsification of records is considered an "IAR".
- 3 All questions not answered as "NA" are answered as compliant.

| Req. # | Requirement | DOC | MAN | C | CAN | IAR | NA | Auditor Comments |
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| Additional questions required for operations approved to use the USDA GAP & GHP Logo | | | | | | | | |
| L-1 | Food Safety Plan or Quality Manual | | | | | | | |
| L-1.1 | The Operation's food safety plan or quality manual contains procedures on how the USDA GAP & GHP logo will be used. | WP | • | | | | | |
| L-1.2 | There is a designated person to be responsible for the control of inventory bearing the logo. | WP | • | | | | | |

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| Name of Auditee: | | | | | | | |
| Date of Audit: | | | | | | | |
| L-2 | Traceability and Recall Program | | | | | | |
| L-2.1 | The Operation uses the USDA GAP & GHP logo only on packages, containers, or consumer units which are traceable. | WP | • | | | | |
| L-3 | Approved Suppliers | | | | | | |
| L-3.1 | The Operation has supplied a list of approved suppliers to the local Federal or State auditor's office. | R | • | | | | |
| L-3.2 | All suppliers currently in use by the operation are listed on the supplied list of approved suppliers. | WP, R | • | | | | |
| L-3.3 | All suppliers have successfully completed and met the requirements of a USDA approved GAP & GHP audit (USDA GAP&GHP audit, commodity specific audit, or Produce GAPs Harmonized Audit, or Harmonized GAP Plus+ Audit) . | R | • | | | | |

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| L-4 | GAP & GHP Logo Approved Use | | | | | | | |
| L-4.1 | The logo is only used on products, processes, and packaging as approved on the SC-652. | R | • | | | | | |
| L-4.2 | All packaging or labels, which bear the GAP & GHP logo, are accountable items. | WP, R | • | | | | | |
| L-4.3 | The Operation's inventory list of these packaging or labels is maintained and current. | R | • | | | | | |
| L-4.4 | The logo is only used on packaging and labels that are clean and bright in appearance, without marks, stains, or other evidence of previous use. | R | • | | | | | |

Code Key: WP = Written Policy/Procedure; R = Record

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| Additional Auditor Comments: |
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DUPLICATION OF CORRECTIVE ACTION TAB INSTRUCTIONS

Any item on a checklist with a checkmark beside the Corrective Action Needed (CAN) box or the Immediate Action Required (IAR) box must be documented using a Corrective Action Report. A separate form is required for each item with either of these entities. If there is more than one form needed, follow the instructions below to duplicate the Corrective Action Report Tab:

1. Right-click the "Corrective Action Report" Tab at the bottom of Excel worksheet.
2. Click "Move or Copy."
3. Under the box titled "Before Sheet," select "(move to end)"
4. Place a check in the box beside "Create a Copy"
5. Click "Ok"

**Produce GAPs Harmonized Food Safety Standard
USDA Checklist**

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|---|------------------------------------|
| USDA, AMS, Specialty Crops Program Produce GAPs Harmonized Food Safety Standard CORRECTIVE ACTION REPORT | Report #: _____ of _____ |
| Company Name/Farm: | Date: |
| Lead Auditor: | |
| Crop(s): | |
| Description of Non Conformity: | |
| Notified company staff at time of finding non-conformity (Yes or No): | |
| Checklist question number and/or section of auditee food safety plan associated with non-conformity: | |
| Corrective Action Proposed and Time Frame for Implementation: <i>(Attach separate sheet if necessary)</i> | |
| Company Representative Signature: | |
| <i>Signature affirms statements concerning Non-Conformity, Corrective Action, and Implementation are correct.</i> | |
| Auditor signature for acceptance of proposed corrective action and timetable for implementation: | |

Top portion for AUDITOR USE ONLY; bottom portion for Company and Auditor use.