



UNITED STATES DEPARTMENT OF AGRICULTURE
 AGRICULTURAL MARKETING SERVICE
 FRUIT AND VEGETABLE PROGRAMS
 FRESH PRODUCTS BRANCH

REQUEST FOR: INSPECTION REINSPECTION APPEAL INSPECTION AUDIT

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

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 0581-0125. The time required to complete this information collection is estimated to average 2 minutes 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.

The U.S. Department of Agriculture (USDA) prohibits discrimination in all its programs and activities on the basis of race, color, national origin, age, disability, and where applicable, sex, marital status, familial status, parental status, religion, sexual orientation, genetic information, political beliefs, reprisal, or because all or part of an individual's income is derived from any public assistance program (Not all prohibited bases apply to all programs.) Persons with disabilities who require alternative means for communication of program information (Braille, large print, audiotape, etc.) should contact USDA's TARGET Center at (202) 720-2600 (voice and TDD).

To file a complaint of discrimination, write to USDA, Director, Office of Civil Rights, 1400 Independence Avenue, S.W., Washington, D.C. 20250-9410, or call (800) 795-3272 (voice) or (202) 720-6382 (TDD). USDA is an equal opportunity provider and employer.

NOTE: Fill in all appropriate blocks; blocks with "*" must be completed. Inspection may be delayed because of incomplete information. Type of Inspection must be selected above.

*Applicant's (Company) Name:		
*Street Address:		
*City, State & Zip:		
*Contact Person:		
*Phone Number:		
*E-Mail Address:		
Enter when different from Applicant:	*Shipper's Name:	
	City and State:	
	Receiver's Name:	
	City and State:	
*Location of Product(s):		

*Date:	
*Time:	

Type of Carrier:	
Type:	Car Number or License Number:
<input type="checkbox"/> Car:	
<input type="checkbox"/> Trailer:	
<input type="checkbox"/> Lot Inspection	

Applicant's P.O. Number:	

Lots Separated by (Optional):		*Inspection Requested For (Must select at least one):	
<input type="checkbox"/> PLI Numbers		<input type="checkbox"/> Quality and Condition (including size when applicable)	
<input type="checkbox"/> Grower Numbers		<input type="checkbox"/> Condition Only	
<input type="checkbox"/> Size		<input type="checkbox"/> Size	
<input type="checkbox"/> Other, Specify:		<input type="checkbox"/> Net Weight	
Digital Images Requested: <input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Other, Specify:	
		<input type="checkbox"/> Auditing Services (Please fill out page 2):	

Products To Be Inspected					
*PRODUCTS	BRANDS/MARKS	*QUANTITY	Type Container	*Size	Type/Variety

Remarks/Special Instructions;



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REQUEST FOR GOOD AGRICULTURAL PRACTICES & GOOD HANDLING PRACTICES AUDIT
(Only fill out this page if requesting an Audit)

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* Company Name:	
*Street Address:	
*City, State & Zip:	
*Phone Number:	
*Contact Person:	
*Phone Number(s) of Contact Person:	
*E-Mail Address:	
Website (if applicable):	

- *Please Choose One: USDA GAP & GHP Audit
 USDA GAP & GHP Audit for Processed Products Branch QTV Program
 Client Requested GAP & GHP Audit

Note: When choosing the USDA audits, the USDA checklist will be used. When choosing the Client requested audit, USDA will audit using a checklist supplied by the client.

The GAP & GHP Checklist and scoresheet is available on the USDA website: <http://www.ams.usda.gov/fv/fpbgapghp.htm>

* Check which sections of the GAP & GHP audit the farm/facility will be audited to and commodities covered:

Part 1 Farm Review		List Commodities being Reviewed
Part 2 Field Harvest & Field Packing Activities		
Part 3 House Packing Facility		
Part 4 Storage and Transportation		
Part 5 Traceback		
Part 6 Wholesale Distribution Facility/Terminal Warehouse		
Part 6a Traceback		
Part 7 Food Defense		

Does the company have more than one facility that will be audited? (circle one) Yes No

Has the company had a USDA GAP & GHP before? (circle one) Yes No

Total acres farmed: _____

Remarks/Special Instructions: