



Food Safety Certification Application Form

SECTION 1 : GENERAL INFORMATION

Company Name			
Address			
City/State		Pin Code	
Primary Contact		Phone No	
Email Address		Fax No.	
Company's Legal Status (Eg: P. Ltd, LLP)			

Have you completed an onsite pre-assessment/GAP analysis	
Buyer's requesting certification	
Provide an estimated date of certification	

SECTION 2 : CHOOSE A PROGRAM *(check the applicable box(es))*

<p>SQF (Safe Quality Food)</p> <p><input type="checkbox"/> 1000 <input type="checkbox"/> 2000</p> <p>Identify level (1, 2 or 3) -----</p> <p><input type="checkbox"/> Multi-site Certification</p>	<p>GlobalG.A.P. (Good Agricultural Practices) <i>(Please check one)</i></p> <p><input type="checkbox"/> IFA (Integrated Farm Assurance)</p> <p><input type="checkbox"/> PFA (Primary Farm Assurance)</p> <p><input type="checkbox"/> Single Site</p> <p><input type="checkbox"/> Multiple Site</p>	<p><input type="checkbox"/> BRC (British Retail Consortium)</p> <hr/> <p><input type="checkbox"/> HACCP (Hazard Analysis Critical Control Point)</p>
<p><input type="checkbox"/> GAP (Good Agricultural Practices)</p>	<p><input type="checkbox"/> GMP (Good Manufacturing Practices) Write the type of facility <i>(e.g. packing shed, cold storage, processing, etc)</i></p>	<p>Organic Certification</p> <p><input type="checkbox"/> NOP <i>(National organic Program)</i></p> <p><input type="checkbox"/> NPOP <i>(National Program for Organic Production)</i></p>

SECTION 3 : SITE DETAILS

For Processors – Provide the following information for each site you want to be audited. For more than 5 sites, please list all sites in an attachment with the following information

Facility Name	Facility Address	City, State & Zip Code	Estimated Square Footage	Product Names (Included in the scope)
Total # of Production Lines		Total # of HACCP plans included in the scope:		
Total # of employees		Total # of Quality Plans included in the scope		
For SQF Clients, identify the Food Sector Category/Categories (SQF) (A list of categories can be found here http://www.sqfi.com/wp-content/uploads/FSC.pdf)				
For BRC Clients, identify the BRC Product Categories (BRC product Categories are located in the BRC Global Standard. Visit www.brcglobalstandards.com for more information)				



For Growers: Provide the following information for each site you want audited. For more than 5 ranches/fields, please list all sites in an attachment with the following information. Please provide a map of your ranches/fields, if there is no specific address. For GlobalG.A.P. clients, please list the acreage per crop.

Ranch and/or Field Names	Address, City, State & Pin Code	Field Acreage	# of Harvesting Crews	Harvesting Dates	# of Packing Sheds (N/A if field packed)	Crops covered or uncovered (please specify)	Crop Names

Is it a transfer of registration? YES NO

If yes please provide the name of your certification body.

Please identify other GICIA services that may be of interest to your company

- Training (HACCP, Food Safety, GHP/GMP)
- Social Auditing / Sustainability Services

SECTION 4 : AFFIRMATION

I affirm that the information provided herein is true and correct to the best of my knowledge, and that I am duly authorized to sign this application. Should our company decide to pursue certification, I agree to supply any information that is deemed necessary for the audit of the operation and/or product to be certified, as well as to comply with all relevant standards.

Print Name: -----

Signature: -----

Title: -----

Date: -----

Please send this signed application to GICIA to Receive a Quote for Service.

For more information call Deepika Bharti

Tel: +91 0120-4248329, 4349906

SECTION 5 : REFERRAL S (Optional)

GICIA is grateful to our clients that pass our certification services information to others. If you know someone that would benefit from receiving a call from us, please complete the contact information below.

Name:		Site Name:	
City/State:		Phone Number:	