Safe Quality Food (SQF) Certification Application

Form# 004Q
By JH
Date 12/16/2024
Revision# 003
Supersedes 9/18/2024

CCI
CeresCertificationsInternational

Clients (site) must register for their audits via the SQFI database at https://www.sqfi.com/assessment-database/. Sites must complete a profile that includes contact info, food sector category, and selection of a certification body - Ceres Certifications, International (CCI). Please notify CCI if a Pre-Assessment audit is request prior to an initial SQF audit. Sites must re-register before re-certification audits and must remain registered at all times to retain their certification. Database assistance at info@sqfi.com. All certified, registered sites will be listed in the SQFI database.

If not-applicable, place an NA inside the field box

1- CLIENT INFORMATION

COMPANY (Site) NAME (legal entity)	
COMPANY (Site) ADDRESS: City, State, Zip Code	
COMPANY PHONE NUMBER	COMPANY WEBSITE
CONTACT NAME (legal Entity)	TITLE
PRIMARY CONTACT: Name, Phone, Email	
BILLING ADDRESS: City, State, Zip Code	
BILLING CONTACT: Name, Phone, Email	
SQF FOOD SAFETY PRACTIONER: Name, Phone, Email	
SQF QUALITY PRACTIONER: Name, Phone, Email	

2- SCOPE OF CERTIFICATION
(Refer to "Step 3 Determine Scope.." within Food Safety / Quality Codes)

a. Indicate your Food Safety Code - Food Sector Category (FSC) applicable to your site

FSC 2 - Indoor Growing, Harvesting of Fresh Produce & Sprouted Seed Crops - Mod 18	FSC 3 - Growing & Production of Fresh Produce & Nuts - Module 7
FSC 4 - Fresh Produce, Grain and Nut Packinghouse Operations - Mod 10	FSC 5 - Extensive Broad Acre Agriculture Operations - Module 8
FSC _____ for Food Manufacturing - Module 11 (see pg. 4 for applicable FSC)	FSC 26 - Storage & Distribution GDP Module 12
FSC 27 - Manufacturer of Food Packaging GMP Module 13	**Food Quality Code**

*All inspections include System Elements Module 2 - Refer to section 4.1 for Applicable Elements within the Food Safety / Quality Codes *

b. PRODUCTS / COMMODITIES
(List all products for each FSC)

FSC	PRODUCTS TO BE CERTIFIED - *Refer to Appendix 1 within the Food Safety Codes* (any additional, please add rows)	Low / Med Risk	High Risk

c. Provide a summary of your operation's activities and scope of your site audit. If any activities occur off-site or if anything in your operation is exempt, please provide details. *Refer to section 3.1 within the codes for further information.*

	3- AUDIT INFORMATION				
1	Is this your first SQF certification audit? If yes, notify CCI if you want a pre-assessment audit (optional)		□ Yes	□ No	

If Yes, a Desk Audit is required (for multi-sites only) upon initial certification. More information will be made available

If No, please provide your initial audit date, and a current copy of your certificate & final report:

2	Select Certification Audit Type:				
Initial Audit		*Refer to Food Code Part A, Step 8*			
Corporate Audit		*Refer to Food Code Part A, Step 8.2*			
Recertification Audit		*Refer to Food Code Part A, Step 11.1*			
Multi-Site Audit		*Comprised of a central site - sub-sites under the same food safety legislation. Refer Food Code to Appendix 4*			
3	How many years have you been under the SQF program (audits)?				
4	Are you transferring from another Certifying Body? Yes, provide CB name	□ Yes	□ No	□ N/A	
	Do you have any outstanding non-conformances?	□ Yes	□ No	□ N/A	
5	Are you working with a consultant? If so, please provide name.	□ Yes	□ No		
6	Have you had an unannounced audit? If yes, please provide date:	□ Yes	□ No	□ N/A	
7	Are you registering for an announced or unannounced audit?	□ Announced	□ Unannounced		
8	Would you like part of your audit to be conducted remotely (up to 50% per SQF Code)? - *Refer to Food Code Part A, Step 8*	□ Yes	□ No		
9	Provide Audit Date Range Dates (based on validity of current cert if applicable) and Blackout Dates (dates not available for audit)				
10	If applicable, if the Quality Audit is requested separately from the Food Safety Audit, provide date ranges. If not applicable, put NA				
11	Are there any addendums or other services required during the audit?	□ Yes	□ No		
	If yes, provide more information:				
12	Is English your preferred auditing language? If not, what language is preferred? _____	□ Yes	□ No		

	4- SITE INFORMATION			
13	Has your site (s) ever issued an FDA recall. If yes, provide details below	□ Yes	□ No	
14	Is your facility exempt from the Food Safety Modernization Act	□ Yes	□ No	
15	Describe your Food Safety (HACCP) Plan (s) below. Describe all CCP's, when applicable			
16	Describe your Food Quality Plan, if applicable			

	FACILITY INFO		
17	Products & Number of operations	Total number of lines	Square feet of Operation
18	Square feet of Storage	Total Square Footage	Total number of employees

19	Total number of shifts		Months of Operation		Hours of Operation	
20	Are any raw material, ingredients or finished product stored off-site?				□ **Yes** □ **No**	
	If yes, provide more information:					
21	Are any of your processes IQF products				□ **Yes** □ **No**	
	If yes, which products?					

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FARM / FIELD INFO

(leave all fields blank if section is not applicable)

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22	Commodity to be audited	Size (acres)	Months of operation (pre-harvest)	Months of harvest

23	Number of Field Employees:		Number of Harvest Crews		Number of Harvest Employees	
24	Do you field pack any commodities?				□ **Yes** □ **No**	
	If yes, will any field pack commodities be included in this audit scope?				□ **Yes** □ **No**	
25	How did you hear about Ceres Certifications?					

By signing below, you certify that the above information is complete and correct to the best of your knowledge and that you agree to comply with the requirements of the SQF Code as well as supply any information required during the certification process. Please email the completed application to CCI. Email: jackie@ceresci.com Address: PO Box 031, Chippewa Falls, WI 54729

Signature of Legal Entity:		Date:	

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CCI Representative:		Date:	

All certified, registered sites will be listed in the SQF assessment database, which will display the certification site details and include the site's name, address, expiration date, food sector category, product(s), relevant Code(s), certification body and country on the SQFI website. Clients (site) must pay an annual SQF fee to SQFI.

CCI prohibits discrimination in employment & services provided on the basis of race, national origin, color, creed, religion, sex, age, disability, veteran status, or sexual orientation.

 Please refer to WWW.SQFI.COM for all normative auditing documents.

Refer to Appendix 1: SQF Food Sector Categories within the SQF Food Code for further details

FOOD SECTOR CATEGORIES FOR FOOD MANUFACTURING, MODULE 11
Refer to the SQF Food Safety Code for further details

FOOD SECTOR CATEGORY	APPLICABLE GMP MODULES
10 Dairy Food Processing	Module 11: GMP for Processing of Food Products
11 Honey Processing	Module 11: GMP for Processing of Food Products
12 Egg Processing	Module 11: GMP for Processing of Food Products
13 Bakery and Snack Food Processing	Module 11: GMP for Processing of Food Products
14 Fruit, Vegetable, and Nut Processing, and Fruit Juices	Module 11: GMP for Processing of Food Products
15 Canning, UHT, and Aseptic Operations	Module 11: GMP for Processing of Food Products
16 Ice, Drink, and Beverage Processing	Module 11: GMP for Processing of Food Products
17 Confectionery Manufacturing	Module 11: GMP for Processing of Food Products
18 Preserved Foods Manufacturing	Module 11: GMP for Processing of Food Products
19 Food Ingredient Manufacturing	Module 11: GMP for Processing of Food Products
20 Recipe Meals Manufacturing	Module 11: GMP for Processing of Food Products
21 Oils, Fats, and the Manufacturing of Oil or Fat-based Spreads	Module 11: GMP for Processing of Food Products
22 Processing of Cereal Grains	Module 11: GMP for Processing of Food Products
25 Repackaging of Products Not Manufactured On Site	Module 11: GMP for Processing of Food Products
33 Food Processing Aids Manufacturing	Module 11: GMP for Processing of Food Products