



FSVP Complete Compliance Supplier Onboarding Form - Standard

PLEASE READ BEFORE CONTINUING

1. Please review and complete the form in its entirety.
2. All documents requested must be provided in English, as required by the FDA.
3. All documents must be up to date (within 3 years based on FSMA Rule). Expired documents will not be accepted.
4. Documents that require a signature and date will be identified in the description.

A. FOREIGN SUPPLIER INFORMATION

Supplier Name:	
Manufacturing Facility Address:	
Manufactured for:	
Main Point of Contact	Name:
	Title:
	Email:
	Phone:
Secondary Point of Contact	Name:
	Title:
	Email:
	Phone:
FDA Registration Number (FFR):	
DUNS Number:	
Facility Website:	
Number of Full-time Employees:	
Name of PCQI (Preventive Controls Qualified Individual) or Food Safety Team Leader:	

Please respond the following questions:

- 1. Please select which of the following best describes your manufacturing operations (you may choose more than one option):**

Manufacturing/Processing
 Packing/Labeling
 Farm (grower/harvester)
 Vendor or brand owner of a food product manufactured by another entity (co-manufacturer)
 Other (please specify) _____

- 2. Which of the following best describes your global annual sales & U.S. market value of the food manufactured, processed, packed, or held? (Averaged over the previous three years, including affiliates and subsidiaries)**

Less than \$1 million
 \$1 million - \$2.5 million
 \$2.5 - \$10 million
 More than \$10 million

B. FSVP REQUIRED DOCUMENTS**CRITICAL DOCUMENTATION TO INITIATE ASSESSMENT****1. Food Safety Plan (or HACCP Plan)**

Must be signed and dated. If provided as separate documents ensure that each document is signed and dated.

Must include:

- a. Food Safety Team
- b. Product Specifications/Descriptions
- c. Process Flow Diagram with Step Descriptions
- d. Raw Material Hazard Analysis Assessment
- e. Process Step Hazard Analysis Assessment
- f. Process Preventive Controls/CCPs
- g. Supply Chain Preventive Controls
- h. Sanitation Preventive Controls
- i. Allergen Preventive Controls

2. Product Specifications

Please ensure each specification is signed and dated and includes the following information, at a minimum.

- a. Product and Process Description
- b. Allergens
- c. Food Intolerance Substances
- d. Food Safety Characteristics
- e. Packaging Used
- f. Intended Use
- g. Intended Consumers
- h. Shelf Life
- i. Labeling Instructions related to Food Safety
- j. Storage and Distributions Conditions

3. Third-party Audit Report & Certificate under GFSI Scheme

Note: In lieu of a valid Audit Report, Sampling Results and Food Safety Records will be requested based on the assessment conducted by the QI.

ADDITIONAL REQUIRED DOCUMENTATION

Disclaimer: The documentation listed below is required and will be requested by the QI to complete the assessment.

4. Product Label Artwork

Please provide full image of label artwork (branding, ingredients, nutrition facts panel, net weight, etc.)

5. Credentials for your PCQI (Preventive Controls Qualified Individual) or Food Safety Team Leader

Acceptable documents can be:

- a. PCQI Training Certification
- b. Other Food Safety-related certifications
- c. Diplomas/Degrees
- d. Resume/Curriculum Vitae

6. Product Recall Plan

Document must be signed and dated.

C. LACF/ACIDIFIED FOODS REQUIREMENTS (If applicable)

If your products are classified as either Low Acid Canned Foods (LACF) or Acidified Food, please provide the requested information and documents.

1. FCE Registration Number.
2. SID Number for each container size or type of packaging of the food imported.
3. Copy of the Process Filing.
4. Name, identity & credentials of your Better Process Control School trained personnel.