



Facility Name (Print) as it should appear on Certificate			
Street Address (Print):		City (Print):	State (Print):
e-mail address (Print):		fax number:	ZIP (Print):
Date Audit Began:		Date Audit Completed:	Date Audit Requested:
Time Audit Began:		Time Audit Completed:	Date of Previous Audit:
USDA Commodity Procurement Audit?			
Circle one			Yes No

**EVALUATION ELEMENTS**

Scopes Requested	Element	Possible Points	Less N/A Points	Adjusted Points	Passing Score	Facility Score	Pass/Fail	Date Passed	General Questions	Reviewing Official	Un-announced
	General Questions	180									
	Part 1- Farm Review	165									
	Part 2- Field Harvesting & Field Packing Activities	130									
	Part 3- House Packing Facility	250									
	Part 4- Storage & Transportation	155									
	Part 5- Traceback	100									
	Part 6 Wholesale Distribution Center/ Warehouse	355									
	Part 6a Traceback	60									
	Part 7- Preventative Food Defense Procedures	180									

\*\* A Passing Score of 80% of the Possible Points or the Adjusted Points, if adjustments are necessary, with no "automatic unsatisfactory" conditions is required for certification.

<b>Commodities Reviewed (Print):</b>	<b>Commodity:</b>									
	<b>Acres:</b>									

Send completed GAP&GHP Certificate to: (choose one)      Inspection office: (list office)      Directly to auditee above:

Lead Auditor Name (Print): \_\_\_\_\_ Duty Station: \_\_\_\_\_ Signature: \_\_\_\_\_

Facility Representative signature: \_\_\_\_\_ Date: \_\_\_\_\_ All Scopes Completed: \_\_\_\_\_

By signing this form, the facility representative agrees to have company information posted to the USDA website. A company will only be listed on the website when all scope audited receive a passing score

For USDA HQ use:

Reviewing Official Name (Print): \_\_\_\_\_ Signature: \_\_\_\_\_

Date Received: \_\_\_\_\_ Date Certificate Mailed: \_\_\_\_\_ Date Posted to Website: \_\_\_\_\_