



FoodIndustry
COUNSEL LLC

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Quick Start: Creating your Foreign Supplier Verification Plan

PRODUCT(S):	Imported _____ Products	PAGE 1 of 12	
FACILITY:		ISSUE DATE	5/30/2017
ADDRESS:		SUPERSEDES	N/A

NAME OF COMPANY

Foreign Supplier Verification Plan

Imported _____ Products

Developed by: _____ PCQI Date: _____
Approved by: _____ Owner Date: _____



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Quick Start: Creating your Foreign Supplier Verification Plan

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FOOD SAFETY PREVENTIVE CONTROLS ALLIANCE

Developed by: _____ PCQI Date: _____
Approved by: _____ Owner Date: _____



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472 PAGES



FSPCA

FOOD SAFETY PREVENTIVE CONTROLS ALLIANCE

**Foreign Supplier
Verification Programs**

First Edition – 2017



Public Version **Participant Manual**



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U.S. owner or consignee. The person in the U.S. who, at time of entry, owns the food, has purchased the food, or has agreed in writing to purchase the food.



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HOW CAN WE MAKE OUR JOB EASIER?



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Foods that have a hazard which will be controlled in US?



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Foods that have a hazard which will be controlled in US



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Foods produced in a country deemed equivalent to US standards



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Foods produced in a country deemed equivalent to US standards



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Foods subject to juice or seafood HACCP regulations



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Foods subject to juice or seafood HACCP regulations



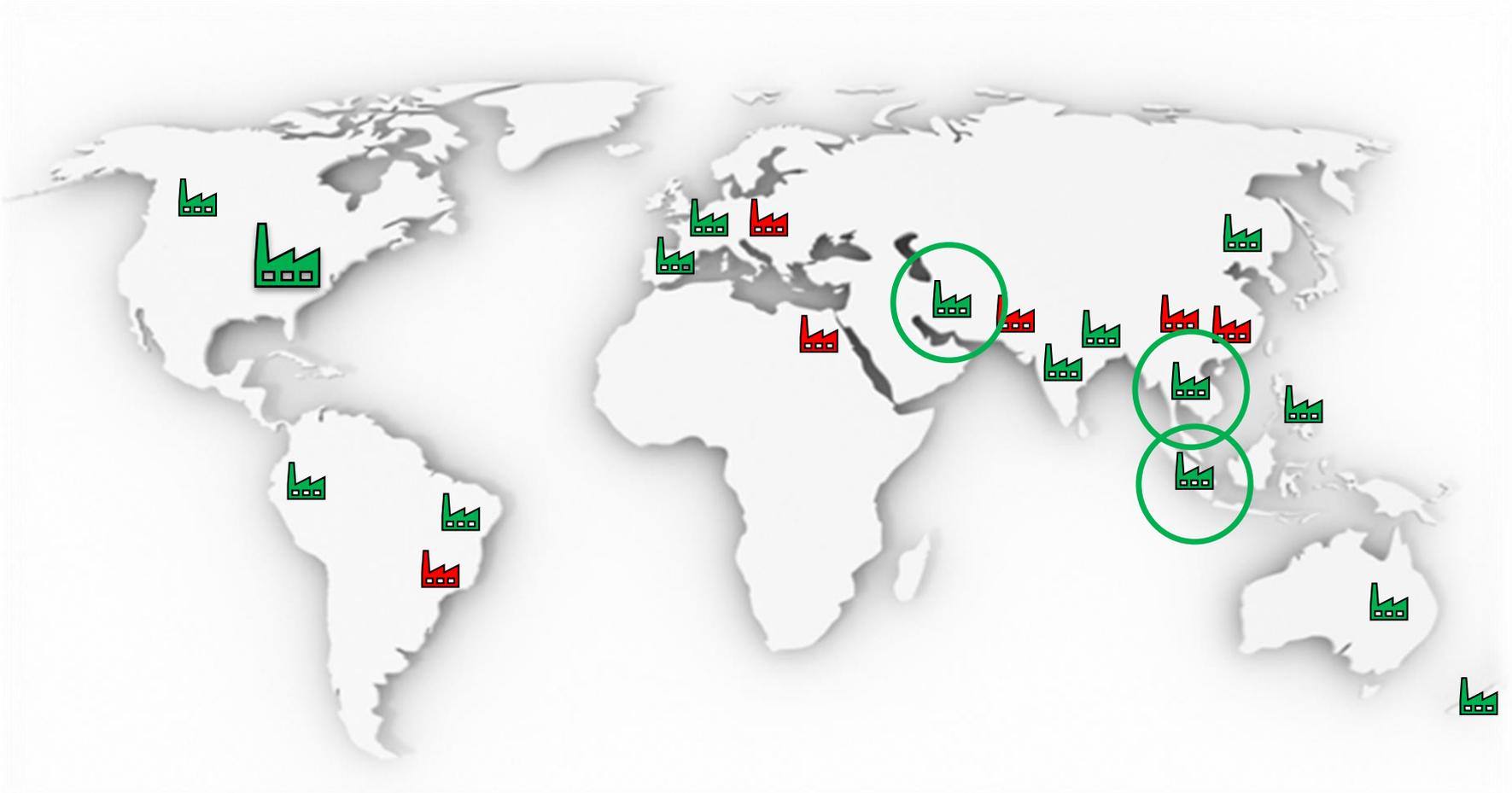
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Low-acid canned foods produced subject to 21 CFR 113



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Low-acid canned foods produced subject to 21 CFR 113



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Meat products subject to USDA regulation at import



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Meat products subject to USDA regulation at import



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IMPORTERS MUST ENSURE THAT ALL FOREIGN SUPPLIERS,
WITH RESPECT TO THE FOOD PRODUCTS THAT ARE BEING IMPORTED,
ARE COMPLYING WITH **EACH OF THE SAME FSMA REQUIREMENTS**,
AND ACHIEVING THE SAME LEVEL OF PUBLIC HEALTH PROTECTIONS,
APPLICABLE TO DOMESTIC SUPPLIERS



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CONDUCT A **HAZARD ANALYSIS** FOR EACH IMPORTED FOOD
EVALUATE RISKS POSED BY FOOD AND SUPPLIER
SUPPLIER **APPROVAL**
SELECT AND PERFORM **VERIFICATION ACTIVITIES**
CONDUCT **CORRECTIVE ACTIONS**
MAINTAIN **RECORDS**



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“QUALIFIED INDIVIDUAL”

HAS THE **EDUCATION, TRAINING, OR EXPERIENCE** NECESSARY TO PERFORM ALL FSVP-REQUIRED ACTIVITIES, INCLUDING THE ABILITY TO INTERPRET AND UNDERSTAND ANY RECORDS THAT ARE REQUIRED TO BE REVIEWED IN PERFORMING THOSE ACTIVITIES



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WHAT DOES IT LOOK LIKE?

PRODUCT(S):	Imported _____ Products	PAGE 1 of 12	
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ADDRESS:		SUPERSEDES	N/A

PRODUCT(S):	Imported _____ Products	PAGE 1 of 12	
FACILITY:		ISSUE DATE	5/30/2017
ADDRESS:		SUPERSEDES	N/A

NAME OF COMPANY

Foreign Supplier Verification Plan

Imported _____ Products

FORM A
[LONG FORM]

Developed by: _____ PCQI Date: _____
Approved by: _____ Owner Date: _____

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PRODUCT(S):	Imported _____ Products	PAGE 1 of 12	
FACILITY:		ISSUE DATE	5/30/2017
ADDRESS:		SUPERSEDES	N/A

NAME OF COMPANY

Foreign Supplier Verification Plan

Imported _____ Products

FORM B
[SHORT FORM]

Developed by: _____ PCQI Date: _____
Approved by: _____ Owner Date: _____



FORM A

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FACILITY:		ISSUE DATE	5/30/2017
ADDRESS:		SUPERSEDES	N/A

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Company Overview	X
Product Description	X
Product Flow Diagram	X
Hazard Analysis	X
Supplier Evaluation	X
Supplier Approval.....	X
Verification Activities.....	X
Corrective Actions.....	X
Approved Supplier Employee Acknowledgement.....	X



FORM A

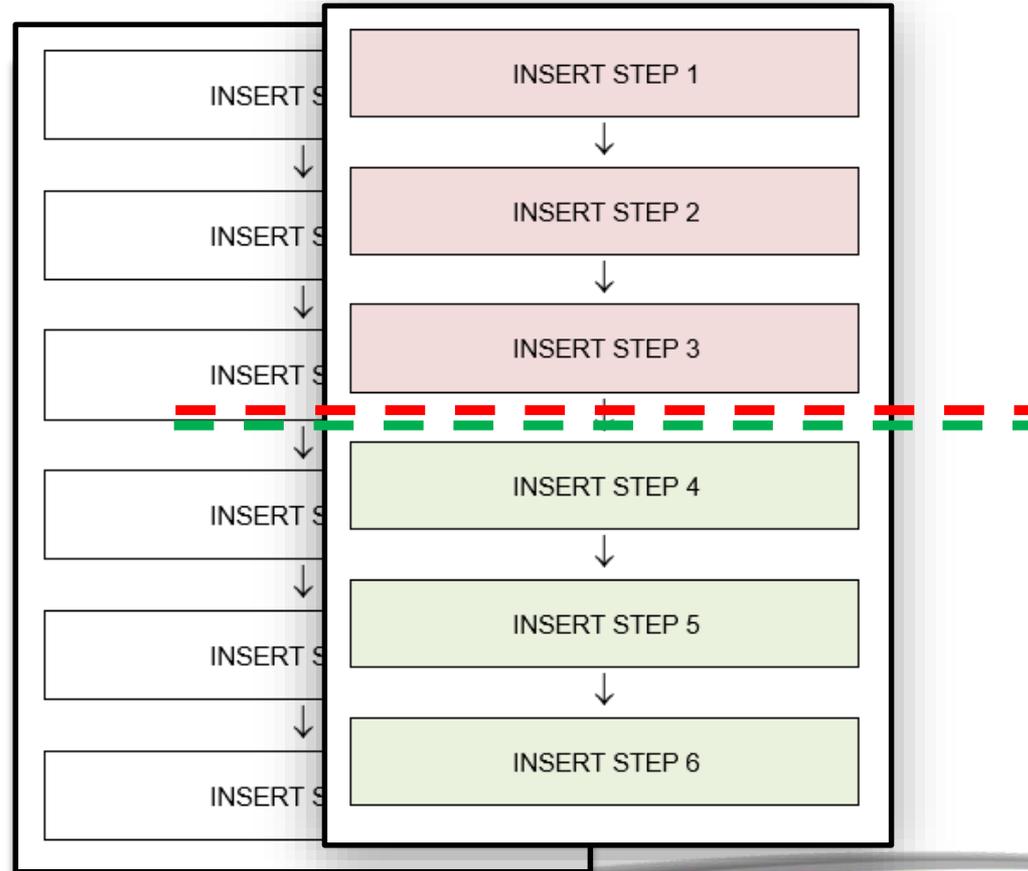
Product Description

Product Name(s)	Imported _____ Products
Product Description, including Important Food Safety Characteristics	
Ingredients	
Packaging Used	
Intended Use	
Intended Consumers	



FORM A

Product Flow Chart



FORM A

Hazard Analysis

(1) PROCESSING Description of processing Step	(2) POTENTIAL HAZARDS Identify <u>potential</u> food safety hazards introduced or controlled at this processing step	(3) Do any <u>potential</u> food safety hazards require a preventive control?	(4) Justification for decision contained in column 3	(5) REQUIRED CONTROLS: What preventive control measure(s) should be applied to minimize or prevent the food safety hazard?	(6) Is a preventive control <u>required</u> at this step before suppliers will be approved?	
STEP 1	B	Bacterial Contamination	YES/NO	INSERT JUSTIFICATION	INSERT CONTROL, IF NEEDED	YES/NO
	C	Chemical Contamination	YES/NO	INSERT JUSTIFICATION	INSERT CONTROL, IF NEEDED	YES/NO
	P	Foreign Material Contamination	YES/NO	INSERT JUSTIFICATION	INSERT CONTROL, IF NEEDED	YES/NO
STEP 2	B	Bacterial Contamination	YES/NO	INSERT JUSTIFICATION	INSERT CONTROL, IF NEEDED	YES/NO
	C	Chemical Contamination	YES/NO	INSERT JUSTIFICATION	INSERT CONTROL, IF NEEDED	YES/NO
	P	Foreign Material Contamination	YES/NO	INSERT JUSTIFICATION	INSERT CONTROL, IF NEEDED	YES/NO



FORM A

Hazard Analysis

(1) PROCESSING Description of processing Step	(2) POTENTIAL HAZARDS Identify <u>potential</u> food safety hazards introduced or controlled at this processing step	(3) Do any <u>potential</u> food safety hazards require a preventive control?	(4) Justification for decision contained in column 3	(5) REQUIRED CONTROLS: What preventive control measure(s) should be applied to minimize or prevent the food safety hazard?	(6) Is a preventive control <u>required</u> at this step before suppliers will be approved?	
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---	--	---	--	---	---

	C	Chemical Contamination	YES/NO	INSERT JUSTIFICATION	INSERT CONTROL, IF NEEDED	YES/NO
	P	Foreign Material Contamination	YES/NO	INSERT JUSTIFICATION	INSERT CONTROL, IF NEEDED	YES/NO



FORM A Hazard Analysis

(1) PROCESSING Description of processing Step	(2) POTENTIAL HAZARDS Identify <u>potential</u> food safety hazards introduced or controlled at this processing step	(3) POTENTIAL HAZARDS Identify <u>potential</u> food safety hazards introduced or controlled at this processing step	<div style="border: 1px solid black; padding: 5px; margin-bottom: 5px; background-color: #f8d7da;">INSERT STEP 1</div> <div style="text-align: center;">↓</div> <div style="border: 1px solid black; padding: 5px; margin-bottom: 5px; background-color: #f8d7da;">INSERT STEP 2</div> <div style="text-align: center;">↓</div> <div style="border: 1px solid black; padding: 5px; margin-bottom: 5px; background-color: #f8d7da;">INSERT STEP 3</div> <div style="text-align: center;">↓</div> <div style="border: 1px solid black; padding: 5px; margin-bottom: 5px; background-color: #d4edda;">INSERT STEP 4</div> <div style="text-align: center;">↓</div> <div style="border: 1px solid black; padding: 5px; margin-bottom: 5px; background-color: #d4edda;">INSERT STEP 5</div> <div style="text-align: center;">↓</div> <div style="border: 1px solid black; padding: 5px; margin-bottom: 5px; background-color: #d4edda;">INSERT STEP 6</div>	(5) REQUIRED CONTROLS: What preventive control measure(s) should be applied to minimize or prevent the food safety hazard?	(6) Is a preventive control <u>required</u> at this step before suppliers will be approved?
STEP 1	B	B		OL, IF NEEDED	YES/NO
	C Che Conta	C		OL, IF NEEDED	YES/NO
	P Foreign Conta	P		OL, IF NEEDED	YES/NO



A hazard **requiring a control** is “a hazard that a person knowledgeable about food safety would establish controls or measures to significantly minimize.

FORM A Hazard Analysis

Consider (1) facility design; (2) raw materials; (3) formulation; (4) packaging activities; (5) storage and distribution; and (6) reasonably foreseeable uses

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STEP 1	B Bacterial Contamination	YES/NO	INSERT JUSTIFICATION	INSERT CONTROL, IF NEEDED	YES/NO

(1) PROCESSING Description of processing Step	(2) POTENTIAL HAZARDS Identify <u>potential</u> food safety hazards introduced or controlled at this processing step	(3) Do any <u>potential</u> food safety hazards require a preventive control?	(4) Justification for decision contained in column 3	(5) REQUIRED CONTROLS: What preventive control measure(s) should be applied to minimize or prevent the food safety hazard?	(6) Is a preventive control <u>required</u> at this step before suppliers will be approved?
---	--	---	--	---	---

	C Chemical Contamination	YES/NO			YES/NO
	P Foreign Material Contamination	YES/NO			



FORM A

Hazard Analysis

(1) PROCESSING Description of processing Step	(2) POTENTIAL HAZARDS Identify <u>potential</u> food safety hazards introduced or controlled at this processing step	(3) Do any <u>potential</u> food safety hazards require a preventive control?	(4) Justification for decision contained in column 3	(5) REQUIRED CONTROLS: What preventive control measure(s) should be applied to minimize or prevent the food safety hazard?	(6) Is a preventive control <u>required</u> at this step before suppliers will be approved?
STEP 1	B Bacterial	YES/NO	INSERT JUSTIFICATION	INSERT CONTROL, IF NEEDED	YES/NO

(1) PROCESSING Description of processing Step	(2) POTENTIAL HAZARDS Identify <u>potential</u> food safety hazards introduced or controlled at this processing step	(3) Do any <u>potential</u> food safety hazards require a preventive control?	(4) Justification for decision contained in column 3	(5) REQUIRED CONTROLS: What preventive control measure(s) should be applied to minimize or prevent the food safety hazard?	(6) Is a preventive control <u>required</u> at this step before suppliers will be approved?
---	--	---	--	---	---

	C Chemical Contamination	YES/NO		DED	YES/NO
	P Foreign Material Contamination	YES/NO			



FORM A

Hazard Analysis

(1) PROCESSING Description of processing Step	(2) POTENTIAL HAZARDS Identify <u>potential</u> food safety hazards introduced or controlled at this processing step	(3) Do any <u>potential</u> food safety hazards require a preventive control?	(4) Justification for decision contained in column 3	(5) REQUIRED CONTROLS: What preventive control measure(s) should be applied to minimize or prevent the food safety hazard?	(6) Is a preventive control <u>required</u> at this step before suppliers will be approved?
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(1) PROCESSING Description of processing Step	(2) POTENTIAL HAZARDS Identify <u>potential</u> food safety hazards introduced or controlled at this processing step	(3) Do any <u>potential</u> food safety hazards require a preventive control?	(4) Justification for decision contained in column 3	(5) REQUIRED CONTROLS: What preventive control measure(s) should be applied to minimize or prevent the food safety hazard?	(6) Is a preventive control <u>required</u> at this step before suppliers will be approved?
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	C Chemical Contamination	YES/NO		DED	YES/NO
	P Foreign Material Contamination	YES/NO			



FORM A

Hazard Analysis

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STEP 1	B Bacterial Contamination	YES/NO	INSERT JUSTIFICATION	INSERT CONTROL, IF NEEDED	YES/NO

(1) PROCESSING Description of processing Step	(2) POTENTIAL HAZARDS Identify <u>potential</u> food safety hazards introduced or controlled at this processing step	(3) Do any <u>potential</u> food safety hazards require a preventive control?	(4) Justification for decision contained in column 3	(5) REQUIRED CONTROLS: What preventive control measure(s) should be applied to minimize or prevent the food safety hazard?	(6) Is a preventive control <u>required</u> at this step before suppliers will be approved?
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	C Chemical Contamination	YES/NO		DED	YES/NO
	P Foreign Material Contamination	YES/NO			



FORM A

Hazard Analysis

(1) PROCESSING Description of processing Step	(2) POTENTIAL HAZARDS Identify <u>potential</u> food safety hazards introduced or controlled at this processing step	(3) Do any <u>potential</u> food safety hazards require a preventive control?	(4) Justification for decision contained in column 3	(5) REQUIRED CONTROLS: What preventive control measure(s) should be applied to minimize or prevent the food safety hazard?	(6) Is a preventive control <u>required</u> at this step before suppliers will be approved?
STEP 1	B Bacterial Contamination	YES/NO	INSERT JUSTIFICATION	INSERT CONTROL, IF NEEDED	YES/NO

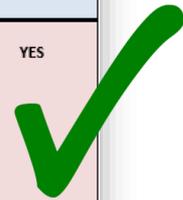
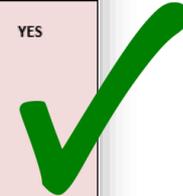
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	C Chemical Contamination	YES/NO			
	P Foreign Material Contamination	YES/NO			



FORM A

Hazard Analysis

(1) PROCESSING Description of processing Step	(2) POTENTIAL HAZARDS Identify <u>potential</u> food safety hazards introduced or controlled at this processing step	(3) Do any <u>potential</u> food safety hazards require a preventive control?	(4) Justification for decision contained in column 3	(5) REQUIRED CONTROLS: What preventive control measure(s) should be applied to minimize or prevent the food safety hazard?	(6) Is a preventive control <u>required</u> at this step before suppliers will be approved?
PRODUCT PACKAGING	B Bacterial Contamination	YES	Although the internal conditions inside the closed system, prior to the release of product, do not permit the introduction or growth of microorganisms, the product is exposed to the environment for a <u>brief moment</u> during filling	Environmental Monitoring Program	YES
	C Chemical Contamination	NO	Because this is a closed system and the products are only exposed to the environment for brief intervals, there is no risk of introduction of unintended chemicals	None Required	NO
	P Foreign Material Contamination	YES	Although this is a closed system with no risk, prior to release of product, of introduction of foreign materials, the product is exposed to the environment for a brief period during filling	Foreign material control program	YES



FORM A

Supplier Evaluation

What is supplier's FDA compliance history?
What is the supplier's general food safety history?

The image shows two overlapping screenshots of the FDA website. The top-left screenshot displays the 'Import Alerts' page, which includes a search bar, navigation tabs (Home, Food, Drugs, Medical Devices, Radiation-Emitting Products, Vaccines, Blood & Biologics), and a sidebar with 'Import Alerts' and 'Search for Import Alerts'. The top-right screenshot displays the 'Safety' page, which includes a search bar, navigation tabs (Home, Food, Drugs, Medical Devices, Radiation-Emitting Products, Vaccines, Blood & Biologics, Animal & Veterinary, Cosmetics, Tobacco Products), and a main heading 'Recalls, Market Withdrawals, & Safety Alerts'. Below these screenshots is a table with two columns: 'SUPPLIER NAME' and 'SUPPLIER EVALUATION'. The table contains two rows of data: 'ABC COMPANY' and 'XYZ COMPANY', both with empty evaluation cells.

SUPPLIER NAME	SUPPLIER EVALUATION
ABC COMPANY	
XYZ COMPANY	



FORM A

Supplier Approval

How does the supplier control the hazard?
 What supplier procedures, processes, and practices are in place?
 What documents can the supplier provide to verify controls?

Supplier Name	Supplier Program or Documents Reviewed to confirm existence of each of the required controls identified in the Hazard Analysis flowchart above	Reviewed (Circle one)	Name of Qualified Individual (QI) Performing Review	Signature of QI Performing Review	Date of Approval
ABC COMPANY	ENVIRONMENTAL MONITORING PROGRAM	YES NO			
	FOREIGN MATERIAL CONTROL PROGRAM	YES NO			
	GMP	YES NO			



FORM A

Supplier Approval

			(1) PROCESSING Description of processing Step	(2) POTENTIAL HAZARDS Identify <u>potential</u> food safety hazards introduced or controlled at this processing step	(3) Do any <u>potential</u> food safety hazards require a preventive control?	(4) Justification for decision contained in column 3	(5) REQUIRED CONTROLS: What preventive control measure(s) should be applied to minimize or prevent the food safety hazard?	(6) Is a preventive control <u>required</u> at this step before suppliers will be approved?
Supplier Name	Supplier Program or Documents Reviewed to confirm existence of each of the required controls identified in the Hazard Analysis flowchart above	Re (Cir	PRODUCT PACKAGING	B Bacterial Contamination	YES	Although the internal conditions inside the closed system, prior to the release of product, do not permit the introduction or growth of microorganisms, the product is exposed to the environment for a <u>brief moment</u> during filling	Environmental Monitoring Program	YES
ABC COMPANY	ENVIRONMENTAL MONITORING PROGRAM			C Chemical Contamination	NO	Because this is a closed system and the products are only exposed to the environment for brief intervals, there is no risk of introduction of unintended chemicals	None Required	NO
	FOREIGN MATERIAL CONTROL PROGRAM			P Foreign Material Contamination	NO	Although this is a closed system with no risk, prior to release of product, the product is exposed to the environment for a brief period during filling	Foreign material control program	YES
	GMP							



FORM A

Supplier Approval

Supplier Name	Supplier Program or Documents Reviewed to confirm existence of each of the required controls identified in the Hazard Analysis flowchart above	Reviewed (Circle one)	Name of Qualified Individual (QI) Performing Review	Signature of QI Performing Review	Date of Approval
ABC COMPANY	ENVIRONMENTAL MONITORING PROGRAM	<input checked="" type="radio"/> YES <input type="radio"/> NO	John Doe		10/10/17
	FOREIGN MATERIAL CONTROL PROGRAM	<input checked="" type="radio"/> YES <input type="radio"/> NO			
	GMP	<input checked="" type="radio"/> YES <input type="radio"/> NO			



FORM A

Verification Activities

Records to be Reviewed	Verification Activity Interval (Check the both which applies)
Records to be Reviewed	<input type="checkbox"/> Every Three Years (or upon reassessment) <input type="checkbox"/> Annually <input type="checkbox"/> Biannually <input type="checkbox"/> Weekly <input type="checkbox"/> Daily <input type="checkbox"/> Each Shipment
Radiological Statement	
Allergen Statement	
GMP program	
Environmental monitoring program	<input type="checkbox"/> Every Three Years (or upon reassessment) <input type="checkbox"/> Annually <input type="checkbox"/> Biannually <input type="checkbox"/> Weekly <input type="checkbox"/> Daily <input type="checkbox"/> Each Shipment
Finished product testing program (microbiological)	
Finished product testing program (chemical)	
Third-Party Audits	<input type="checkbox"/> Every Three Years (or upon reassessment) <input type="checkbox"/> Annually <input type="checkbox"/> Biannually <input type="checkbox"/> Weekly <input type="checkbox"/> Daily <input type="checkbox"/> Each Shipment
Certificates of Analysis (Chemical)	
Certificates of Analysis (Microbiological)	



FORM A

Corrective Actions

PRODUCT(S):	Imported _____ Products	PAGE 12 of 13	
FACILITY:		ISSUE DATE	5/30/2017
ADDRESS:		SUPERSEDES	N/A

Corrective Actions

If [INSERT COMPANY NAME] discovers in any product shipment it receives that there has been any deviation from any of the controls identified, then [INSERT COMPANY NAME] will conduct a Food Safety Assessment in order to determine whether the deviation creates a food safety issue affecting the safety of the product and whether any additional actions should be taken in response with respect to the product. The conclusions of this Food Safety Assessment, and any additional actions that may be needed with respect to the product, will be documented in the Approved Supplier's file.

In addition to the Food Safety Assessment, [INSERT COMPANY NAME] will also inform its Approved Supplier of nature of the deviation, and require its Approved Supplier to conduct a written root cause analysis to determine the cause of the deviation. In addition to the root cause analysis, [INSERT COMPANY NAME] will also require its Approved Supplier to submit written corrective actions that the Approved Supplier will implement to ensure that the deviation does not reoccur. In the event that [INSERT COMPANY NAME] is not satisfied with the root cause analysis and corrective actions provided by the Approved Supplier, then that supplier will be disqualified and removed from the Approved Supplier list. If that occurs, [INSERT COMPANY NAME] will no longer purchase product from that supplier.

Copies of the written root cause analysis and corrective actions shall be maintained in the Approved Supplier's file.



FORM A

Approved Supplier Employee Acknowledgement

Approved Supplier Employee Acknowledgement

[INSERT COMPANY NAME] will not purchase any products from any suppliers that are not identified as Approved Suppliers pursuant to this program. Each of the employees identified below, who are responsible for purchasing products subject to this program, hereby acknowledge that they will only purchase products from those Approved Suppliers who are identified in this program.

Name of Employee	Title	Signature	Date
Jane Doe	VP of Sales	<i>Jane Doe</i>	10/10/17



FORM B

Short Form

PRODUCT(S):	Imported _____ Products	PAGE 1 of 12	
FACILITY:		ISSUE DATE	5/30/2017
ADDRESS:		SUPERSEDES	N/A

NAME OF COMPANY

Foreign Supplier Verification Plan

Imported _____ Products

FORM B

[SHORT FORM]

Developed by: _____

PCQI

Date: _____

Approved by: _____

Owner

Date: _____



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COUNSEL LLC

FORM B

Hazard Analysis

PRODUCT(S):	Imported _____ Products	PAGE 1 of 12	
FACILITY:		ISSUE DATE	5/30/2017
ADDRESS:		SUPERSEDES	N/A

NAME OF COMPANY

Foreign Supplier Verification Plan

Imported _____ Products

Hazard Analysis of product (or product category) by evaluation of the HACCP Plan, Food Safety Plan, or other food safety program documentation (including but not limited to supplier questionnaires). The information must demonstrate the supplier has appropriately identified relevant hazards and is operating with appropriate controls to manage food safety risks to an acceptable level.

Developed by: _____ PCQI Date: _____
Approved by: _____ Owner Date: _____



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FORM B

Hazard Analysis, Evaluation and Approval

Supplier Name	Documents evaluated to verify existence of hazard analysis and appropriate controls	Reviewed (Circle one)	Name of Qualified Individual (QI) Performing Review	Signature of QI Performing Review	Date of Approval
ABC COMPANY	HACCP PLAN	YES NO	John Doe		10/10/17
	GMP PROGRAM	YES NO			
	ENVIRONMENTAL MONITORING PROGRAM	YES NO			



FORM B Hazard Analysis, Evaluation and Approval

Supplier Name	Documents Reviewed to verify existence of	Reviewed (Circle one)	Name of Qualified Individual (QI) Performing Review	Signature of QI Performing Review	Date of Approval
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U.S. FOOD & DRUG ADMINISTRATION

Home | Food | Drugs | Medical Devices | Radiation-Emitting Products | Vaccines, Blood & Biologics

For Industry

Home > For Industry > Import Program > Actions & Enforcement > Import Alerts

Import Alerts

Removal from Import Alert

Search for Import Alerts

Import Alerts

SHARE | TWEET | LINKEDIN | PIN IT | EMAIL

Overview

This page provides information on what an import alert

U.S. FOOD & DRUG ADMINISTRATION

Home | Food | Drugs | Medical Devices | Radiation-Emitting Products | Vaccines, Blood & Biologics | Animal & Veterinary | Cosmetics | Tobacco Products

Safety

Home > Safety > Recalls, Market Withdrawals, & Safety Alerts

Recalls, Market Withdrawals, & Safety Alerts

Spotlight

SUPPLIER NAME	SUPPLIER EVALUATION
ABC COMPANY	
XYZ COMPANY	



FORM B

Verification Activities

Records to be Reviewed	Verification Activity Interval (Check the both which applies)
Records to be Reviewed	<input type="checkbox"/> Every Three Years (or upon reassessment) <input type="checkbox"/> Annually <input type="checkbox"/> Biannually <input type="checkbox"/> Weekly <input type="checkbox"/> Daily <input type="checkbox"/> Each Shipment
Radiological Statement	
Allergen Statement	
GMP program	
Environmental monitoring program	<input type="checkbox"/> Every Three Years (or upon reassessment) <input type="checkbox"/> Annually <input type="checkbox"/> Biannually <input type="checkbox"/> Weekly <input type="checkbox"/> Daily <input type="checkbox"/> Each Shipment
Finished product testing program (microbiological)	
Finished product testing program (chemical)	
Third-Party Audits	<input type="checkbox"/> Every Three Years (or upon reassessment) <input type="checkbox"/> Annually <input type="checkbox"/> Biannually <input type="checkbox"/> Weekly <input type="checkbox"/> Daily <input type="checkbox"/> Each Shipment
Certificates of Analysis (Chemical)	
Certificates of Analysis (Microbiological)	



FORM B

Corrective Actions

PRODUCT(S):	Imported _____ Products	PAGE 12 of 13	
FACILITY:		ISSUE DATE	5/30/2017
ADDRESS:		SUPERSEDES	N/A

Corrective Actions

If [INSERT COMPANY NAME] discovers in any product shipment it receives that there has been any deviation from any of the controls identified, then [INSERT COMPANY NAME] will conduct a Food Safety Assessment in order to determine whether the deviation creates a food safety issue affecting the safety of the product and whether any additional actions should be taken in response with respect to the product. The conclusions of this Food Safety Assessment, and any additional actions that may be needed with respect to the product, will be documented in the Approved Supplier's file.

In addition to the Food Safety Assessment, [INSERT COMPANY NAME] will also inform its Approved Supplier of nature of the deviation, and require its Approved Supplier to conduct a written root cause analysis to determine the cause of the deviation. In addition to the root cause analysis, [INSERT COMPANY NAME] will also require its Approved Supplier to submit written corrective actions that the Approved Supplier will implement to ensure that the deviation does not reoccur. In the event that [INSERT COMPANY NAME] is not satisfied with the root cause analysis and corrective actions provided by the Approved Supplier, then that supplier will be disqualified and removed from the Approved Supplier list. If that occurs, [INSERT COMPANY NAME] will no longer purchase product from that supplier.

Copies of the written root cause analysis and corrective actions shall be maintained in the Approved Supplier's file.



FORM B

Approved Supplier Employee Acknowledgement

Approved Supplier Employee Acknowledgement

[INSERT COMPANY NAME] will not purchase any products from any suppliers that are not identified as Approved Suppliers pursuant to this program. Each of the employees identified below, who are responsible for purchasing products subject to this program, hereby acknowledge that they will only purchase products from those Approved Suppliers who are identified in this program.

Name of Employee	Title	Signature	Date
Jane Doe	VP of Sales	<i>Jane Doe</i>	10/10/17



PRODUCT(S):	Imported _____ Products	PAGE 1 of 12	
FACILITY:		ISSUE DATE	5/30/2017
ADDRESS:		SUPERSEDES	N/A

NAME OF COMPANY

Foreign Supplier Verification Plan

Imported _____ Products

Developed by: _____ PCQI Date: _____
 Approved by: _____ Owner Date: _____



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