

Audit Information



Audit Type: SQF Food Safety Audit Edition 8.0

Audit Number: 71744

Supplier: Taylor Logistics Inc. (54838)

Company Name: Taylor Logistics Inc.

Company Number: 35830

Company Address:

9756 International Blvd.
Cincinnati, OH 45246
United States

Certification Body: Mérieux NutriSciences Certification

Certification Body Address:

111 East Wacker Dr
Suite 2300
Chicago, IL 60601
United States

CB#: CB-1-Mérieux

Accreditation Body: JAS-ANZ

Accreditation Number: Z3720906AB

Audit Duration: 05/14/2019 - 05/15/2019

Time Spent Auditing: 17 hours

Time Spent Writing Report: 8 hours

Certification Issue Date: 05/31/2019

Certification #: 35830

Certification Type: Initial Certification

Audit Rating/Score: Excellent / 97

Certification Decision Date: 05/31/2019

Certification Expiration Date: 07/29/2020

Certification Decision: Certified

Food Sector Categories:

26. Food Storage and Distribution

Products: Bulk Ingredients, Soda Beverages, Dry Confections, Dry Cereal, Pet Food

Scope of Certification: Bulk Ingredients, Soda Beverages, Dry Confections, Dry Cereal, Pet Food

Audit Team

FIRST NAME	LAST NAME	PERSON #	ROLE
John	Kern	9744	Lead Auditor
Sandra	Luttrell	132944	Technical Reviewer

Non-Conformities

ELEMENT	PRIMARY RESPONSE	EVIDENCE
12.2.10.4	Minor	The pest control operator used Suspend SC on 4/5/2019. Suspend SC was not on the approved pesticide list.
12.6.4.1	Minor	Webbing and dead insects were observed on a large guard being stored for a customer on the east side of the building. There were other items in this area that had webbing and dust on them.
12.7.3.3	Minor	The insect light traps were not included on the glass map.

Root Cause Analysis

ELEMENT	PRIMARY RESPONSE	ROOT CAUSE
12.2.10.4	Minor	Lack of communication between the service technician and the SQF Practitioner.
12.6.4.1	Minor	Oversight by cleaning personnel.
12.7.3.3	Minor	Light traps were not fully installed at the time the Glass Map was created.

Corrective Actions

CLAUSE	PRIMARY RESPONSE	CORRECTIVE ACTION	VERIFICATION OF CLOSEOUT	COMPLETION DATE	CLOSE OUT
12.2.10.4	Minor	Document # 10.7 Approved Pesticide Checklist was revised to include Suspend SC on 05/15/2019.	Approved based on adding Suspend SC to the approved pesticide list and plan to meet with the pest control technician prior them leaving. J. Kern	05/15/2019	05/22/2019
12.6.4.1	Minor	Boneyard cleaning and inspection added to the Master Cleaning Schedule, Document # 11.5	Approved based on adding the area to the master cleaning schedule. J. Kern	05/17/2019	05/22/2019
12.7.3.3	Minor	The Glass Map was revised on 05/15/2019 to include the light traps.	Approved based on adding the light traps to the glass map. J. Kern	05/15/2019	05/22/2019

Statements

SECTION	ELEMENT	EVIDENCE
Audit Statement Audit	SQF Practitioner Name	Rex Taylor
	SQF Practitioner Email	rex@taylordist.com
	Facility Description	The Taylor Logistics Inc. facility was located in an industrial area on the north side of Cincinnati, OH. The facility was built in 1990. Taylor Logistics moved into the building in late 2018. Taylor Logistics was privately owned and was founded in 1850. There were 11 employees working at this location including 5 warehouse employees, management and support staff. The facility operates one shift, five days per week. The building was 192,000 square feet and has 185,232 square feet of warehouse space. The remainder was offices and support areas. The warehouse was an open space with a 24 foot ceiling. There was no racking. The facility did not have any coolers or freezers. The scope of certification includes the storage and distribution of bulk ingredients, soda beverages, dry confections, dry cereals and pet food. The facility stores products on consignment with the product owner. There were no product suppliers other than the customers. All food products were shelf stable and maintained in sealed packaging. There were no exposed food products in the warehouse. In addition to food storage the company also stores other items not related to food such as automotive parts. The food safety plan did not have any critical control points. Corrective actions from the SQF Desk audit have been completed.
	Opening Meeting	Rex Taylor: President, Mike Wilson: QA Manager, Rick Johnson: Food Safety Manager, John Kern: SQF Auditor
	Auditor Recommendation	Initial certification to the SQF Food Safety Code for Storage and Distribution after non-conformances are closed.
	Closing Meeting	Rex Taylor: President, Drew Taylor: Vice President, Mike Wilson: QA Manager, John Kern: SQF Auditor

Result List

SECTION	ELEMENT	PRIMARY RESPONSE	EVIDENCE
2.1.1 Food Safety Policy	2.1.1.1	Compliant	

SECTION	ELEMENT	PRIMARY RESPONSE	EVIDENCE
	2.1.1.2	Compliant	
<p><i>Section Summary:</i> The SQF Management Policy statement was dated 11/16/2018 and describes the commitment to a HACCP based food safety and quality culture. The policy statement includes continuous improvement and providing necessary resources to accomplish goals. The statement was posted in English near the door prior to the entrance to the warehouse. The statement was signed by the President of the company.</p>			
2.1.2 Management Responsibility	2.1.2.1	Compliant	
	2.1.2.2	Compliant	
	2.1.2.3	Compliant	
	2.1.2.4	Compliant	
	2.1.2.5	Compliant	
	2.1.2.6	Compliant	
	2.1.2.7	Compliant	
	2.1.2.8	Compliant	
	2.1.2.9	Compliant	
	2.1.2.10	Compliant	
	2.1.2.11	Not Applicable	The initial facility audit was announced and black-out dates did not apply.
<p><i>Section Summary:</i> The facility maintains an organizational chart dated 3/27/2019 describing the reporting structure of the company and identifies an SQF Practitioner. The organizational chart was posted prior to entering the warehouse. Additional charts were available for the food safety team and food quality team. The President of the company and Food Safety Manager were SQF Practitioners with the responsibility to develop and implement the SQF System. They both completed external HACCP training through the International HACCP Alliance Oct. 9 - 10, 2012. Additional HACCP training certificates were available for other staff. The facility has effectively implemented a training program. Job descriptions for those responsible for food safety were available dated 3/27/2019. The job descriptions included the President, Vice President, SQF Practitioner and other key staff. Each job description included an alternate in case of absence. The President of the company is an SQF Practitioner and is responsible for managing the continued operation of the food safety system in the event of organizational changes. The Management Structure and Support policy dated 2/11/2019 describes overall management responsibilities. Employees interviewed understood their responsibilities related to food safety and quality. The facility audit was announced and black-out dates did not apply.</p>			
2.1.3 Management Review	2.1.3.1	Compliant	
	2.1.3.2	Compliant	
	2.1.3.3	Compliant	
	2.1.3.4	Compliant	
<p><i>Section Summary:</i> The Management Structure and Support policy dated 2/11/2018 section 4.3 describes the management review of customer complaints, internal audits, training, CAPA program, sanitation effectiveness and other topics. A SQF pre-assessment was completed August 16 - 17, 2018. The management team was responsible for reviewing the program including any changes that may impact the ability to deliver safe food. The facility conducts a monthly quality and food safety meeting to review.</p>			
2.1.4 Complaint Management	2.1.4.1	Compliant	
	2.1.4.2	Compliant	
	2.1.4.3	Compliant	
	2.1.4.4	Compliant	

SECTION	ELEMENT	PRIMARY RESPONSE	EVIDENCE
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Section Summary: The Customer Complaint policy 8.3 dated 1/8/2019 describes customer complaint program. The policy addresses the investigation of complaints, corrective actions and summarizing a trend analysis. A CAPA Program form 8.1 dated 12/3/2018 was used to document customer complaints. Customer complaint records were reviewed from 11/16/2018, 2/26/2019, 3/6/2019 and 3/14/2019. Trending reports were reviewed during monthly management review meetings. The facility has not had any food safety related complaints since moving into the facility.

2.1.5 Crisis Management Planning	2.1.5.1	Compliant	
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	2.1.5.2	Compliant	
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	2.1.5.3	Compliant	
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	2.1.5.4	Compliant	
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Section Summary: The Crisis Management SOP 2.1 dated 4/23/2019 describes how the company manages a crisis situation. The policy covers bomb threats, severe weather, fires and other possible crisis situations. The policy addresses ensuring food safety in a crisis. An emergency contact list dated 12/5/2018 was available and included contact information for SQFI and the certification body as well as contact information for expert advice. The food defense team was also the crisis management team. A test of the crisis management plan was conducted 1/7/2019 based on a fire drill. The drill also included holding product potentially affected pending inspection. The President of the company was identified as the spokesperson for the company.

2.2.1 Food Safety Management System	2.2.1.1	Compliant	
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	2.2.1.2	Compliant	
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Section Summary: The facility has implemented a food safety management system. Policy manuals were maintained in binders and included a policy statement, organizational chart and other documents necessary to support the implementation of the SQF System. The SQF Practitioner was responsible for justifying changes to the SQF System.

2.2.2 Document Control	2.2.2.1	Compliant	
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	2.2.2.2	Compliant	
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	2.2.2.3	Compliant	
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Section Summary: The Document Control policy 7.3 dated 3/21/2019 describes the document control requirements. Documents reviewed contained a document number, effective date, version number and approval. The President was responsible for document control. SharePoint Versioning was used to track changes to documents. Documents were readily available mostly in hard copy form throughout the audit. A document register dated 5/13/2019 was available. A SharePoint database of current documents was also available.

2.2.3 Records	2.2.3.1	Compliant	
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	2.2.3.2	Compliant	
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	2.2.3.3	Compliant	
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Section Summary: The Document Control policy includes section 5.3 with requirements for completing records including no missing checks, initials, times, dates, ink only, no pencil and other requirements. Section 5.13 of the policy describes record retention requirements. Food safety, quality and food defense records were to be maintained for 3 years. Records reviewed during the audit were readily available including shipping and receiving records with trailer inspections from 1/8/2019 (inbound), 1/10/2019 (inbound and outbound), 2/4/2019 (outbound), 2/6/2019 (outbound), 2/7/2019 (outbound), 2/8/2019 (inbound and outbound), 3/4/2019 (inbound), 3/5/2019 (outbound), 3/6/2019 (inbound and outbound), 3/7/2019 (inbound), 5/1/2019 (inbound), 5/7/2019 (outbound), 5/8/2019 (outbound), 5/9/2019 (outbound), 5/13/2019 (inbound and outbound).

2.3.1 Product for Storage and Distribution	2.3.1.1	Compliant	
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Section Summary: The Storage Practices SOP 4.17 dated 1/7/2019 describes product handling requirements. The requirements included proper identification of stored product, adequate lighting, cleanliness, humidity control for quality purposes. The facility did not have any coolers or freezers or products that required refrigeration.

2.3.2 Incoming Supplies	2.3.2.1	Compliant	
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	2.3.2.2	Compliant	
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SECTION	ELEMENT	PRIMARY RESPONSE	EVIDENCE
	2.3.2.3	Compliant	
	2.3.2.4	Compliant	
<p><i>Section Summary:</i> The facility maintains an electronic list of active approved suppliers items not intended for distribution including cleaning supplies, vests, seals, slip sheets and other items.. The list included contact information for the suppliers including the chemical supplier and supplier of stretch wrap and slip sheets used by the site. The facility used only basic cleaning chemicals, janitorial supplies and packaging materials that were compliant with relevant legislation. Product descriptions beyond the names of the products were not required based on the types of supplies ordered and received. The facility stored only sealed products at ambient temperatures and there were no food contact surfaces. The risk level of the supplier was identified on the electronic list of approved suppliers.</p>			
2.3.3 Contract Service Providers	2.3.3.1	Compliant	
	2.3.3.2	Compliant	
<p><i>Section Summary:</i> The Contract Service Providers Requirements and Management policy 12.1 dated 4/30/2019 described how contractors were managed. Contractors go through an approval process. Contractors and visitors were required to follow facility GDP requirements. A register of contract service providers was maintained electronically.</p>			
2.3.4 Contract Third Party Storage or Distributor	2.3.4.1	Compliant	
	2.3.4.2	Compliant	
	2.3.4.3	Compliant	
<p><i>Section Summary:</i> The TLI Carrier Selection SOP 12.3a dated 8/14/2018 describes how the company selects and approves carriers including a carrier qualification checklist. Policies 12.3b Fraud Protection, 12.3c Insurance Framework and 12.3d FSMA include additional requirements for third party carriers. The facility uses Carrier411 or DAT Carrier Watch to monitor carriers. Current insurance, safety ratings and other information was available. Carrier contracts were required with a contract dated 5/6/2019 with Bettchers available for review. Changes to contracts required management approval. Carriers with a Conditional or Unsatisfactory rating were not used. The facility does not use third party storage providers.</p>			
2.4.1 Food Legislation	2.4.1.1	Compliant	
	2.4.1.2	Compliant	
	2.4.1.3	Compliant	
<p><i>Section Summary:</i> The Regulatory Currency SOP 7.14 dated 1/8/2019 describes how the facility meets regulatory requirements. The facility is kept informed of changes to legislation, technical developments and industry codes of practices through email updates, professional organizations, industry publications and other methods listed in SOP 7.14. No evidence was observed that products delivered did not meet regulatory requirements. The crisis contact list includes contact information for SQFI and the certification body and provisions were in place to these bodies within 24 hours of a food safety event requiring public notification.</p>			
2.4.2 Good Storage and Distribution Practices	2.4.2.1	Compliant	
	2.4.2.2	Compliant	
<p><i>Section Summary:</i> Document 4.9 dated 12/17/2018 describes the facility Good Distribution Practices including no food, drink or nicotine products allowed in the warehouse, hand washing and other requirements. The program has been effectively implemented as evidenced by observations.</p>			
2.4.3 Food Safety Plan	2.4.3.1	Compliant	
	2.4.3.2	Compliant	
	2.4.3.3	Compliant	
	2.4.3.4	Compliant	
	2.4.3.5	Compliant	
	2.4.3.6	Compliant	

SECTION	ELEMENT	PRIMARY RESPONSE	EVIDENCE
	2.4.3.7	Compliant	
	2.4.3.8	Compliant	
	2.4.3.9	Compliant	
	2.4.3.10	Compliant	
	2.4.3.11	Compliant	
	2.4.3.12	Compliant	
	2.4.3.13	Compliant	
	2.4.3.14	Compliant	
	2.4.3.15	Compliant	
	2.4.3.16	Compliant	
	2.4.3.17	Compliant	
<p><i>Section Summary:</i> The facility has implemented a food safety plan for the storage and distribution of food and pet food products. A food safety team was established. A product description with intended use was available. A flow chart revised 12/5/2018 was available with each step in the process. A hazard analysis was conducted for each step in the process evaluating each step for biological, physical and chemical hazards. Based on the hazard analysis, the process did not have any critical control points. Potential hazards included pest infestation, allergen cross contact and foreign material contamination and were controlled by prerequisite programs. An annual validation and reassessment of the food safety plan was conducted 12/17/2018. All food products were received in sealed packages and shipped in sealed packages with no product exposure during the process. The products were stored in ambient conditions. There were no coolers or freezers. The facility did not store raw proteins.</p>			
2.4.4 Approved Suppliers	2.4.4.1	Compliant	
	2.4.4.2	Compliant	
	2.4.4.3	Compliant	
	2.4.4.4	Compliant	
	2.4.4.5	Compliant	
<p><i>Section Summary:</i> The Supplier Approval SOP 12.3 dated 4/30/2019 describes supplier requirements and was based on prior performance and other criteria. The plan includes site visits, third party audits, food safety and quality programs, food defense programs, food fraud, credit check, allergen awareness and other topics. The company does not own the products stored and distributed. The company consigns to store and distribute the customer's products and therefore the customer was also the supplier. The facility does not receive materials from other sites under the same corporate ownership and does not receive materials from non-approved suppliers. A SQF certificate was available for Frutarom expiring 8/1/2019 which was a customer supplying products to store and distribute. The program also addresses non-food suppliers. The site stores food and non-food products.</p>			
2.4.5 Non-conforming Product or Equipment	2.4.5.1	Compliant	
	2.4.5.2	Compliant	
<p><i>Section Summary:</i> The Non-Conforming Products and Equipment SOP 8.4 dated 5/9/2019 describes program for controlling these materials. The policy describes that any employee may place an item on hold. Products were owned by the customer and the customer may place products on hold. Only authorized personnel could take equipment off hold. An authorized individual from the product owner may authorize the release of food products. A hold log was maintained electronically. Records were reviewed from mushrooms released 4/9/2019. The canned mushrooms were placed on hold when received pending approval from the customer confirming the product passes USDA testing. An equipment hold log was maintained separate from the product hold log. The facility was also holding two products in the system for product rotation purposes. There was nothing wrong with the product, however, the format of the expiration date in the computer was not consistent with warehouse management system to allow for proper stock rotation. Therefore the newer product was placed on hold until the older product ships.</p>			
2.4.6 Product Recoup	2.4.6.1	Not Applicable	The facility does not perform recoup or rework activities.
<p><i>Section Summary:</i> The facility does not perform recoup or rework activities.</p>			

SECTION	ELEMENT	PRIMARY RESPONSE	EVIDENCE
2.4.7 Product Release	2.4.7.1	Compliant	
	2.4.7.2	Compliant	
<p><i>Section Summary:</i> The Product Release Program 9.10 dated 1/25/2019 describes the process of releasing product. Products were released after inspection prior to loading and completion of a Product Release Form. Records of Product Release Forms were reviewed from 1/10/2019, 2/4/2019, 2/6/2019, 2/7/2019, 2/8/2019, 3/5/2019, 3/6/2019, 5/7/2019, 5/8/2019, 5/9/2019 and 5/13/2019. The Non-Conforming Product and Equipment policy is followed to release products that have been placed on hold, if applicable.</p>			
2.5.1 Validation and Effectiveness	2.5.1.1	Compliant	
	2.5.1.2	Compliant	
<p><i>Section Summary:</i> The facility uses Document 7.17 Validation and Verifications dated 1/18/2019 to track validation and verification activities for pre-requisite programs, GDPs and other items to ensure the SQF System has been effectively implemented. Validation records included a review of the allergen, GDP and foreign material programs 1/19/2019 to validate their effectiveness. The document included additional validation activities. The food safety plan did not have any critical control points and validation was not required. The food safety plan was reassessed 12/17/2018.</p>			
2.5.2 Verification Activities	2.5.2.1	Compliant	
	2.5.2.2	Compliant	
	2.5.2.3	Compliant	
<p><i>Section Summary:</i> Document 7.17 was a schedule of verification and validation activities including the activity, frequency of completion and the responsibility for completing each activity. Verification records were reviewed for a mock recall conducted 1/10/2019 to verify the business continuity program. Shipping and receiving records with trailer inspections were reviewed from 1/8/2019 (inbound), 1/10/2019 (inbound and outbound), 2/4/2019 (outbound), 2/6/2019 (outbound), 2/7/2019 (outbound), 2/8/2019 (inbound and outbound), 3/4/2019 (inbound), 3/5/2019 (outbound), 3/6/2019 (inbound and outbound), 3/7/2019 (inbound), 5/1/2019 (inbound), 5/7/2019 (outbound), 5/8/2019 (outbound), 5/9/2019 (outbound), 5/13/2019 (inbound and outbound). The Validation and Verification schedule includes additional verification activities.</p>			
2.5.3 Corrective and Preventative Action	2.5.3.1	Compliant	
	2.5.3.2	Compliant	
<p><i>Section Summary:</i> A CAPA Program form was used to document corrective action for internal issues and customer complaints. CAPAs related to customer complaints were reviewed from 11/16/2018, 2/26/2019, 3/6/2019 and 3/14/2019. CAPAs not related to customer complaints were reviewed from 1/12/2019 to address a process deficiency. The facility has not had to completed any food safety related corrective actions and has not had any food safety complaints.</p>			
2.5.5 Internal Audits and Inspections	2.5.5.1	Compliant	
	2.5.5.2	Compliant	
	2.5.5.3	Compliant	
	2.5.5.4	Compliant	
	2.5.5.5	Compliant	
<p><i>Section Summary:</i> The Internal Audits Program document 7.5 dated 8/14/2018 describes the internal audit program including the internal audit team and internal auditor training. The facility was going through the SQF code to internally audit against the code. Records of the internal quality systems audit were reviewed from 2/26/2019 (sections 12.1 - 12.6), 3/26/2019 (sections 2.1 - 2.2 and 12.2.8 - 12.2.9.6), 4/30/2019 (2.3 - 2.8). The records included other sections of the code internally audited on other dates. The records, including the corrective actions, were maintained electronically on a spreadsheet. Additionally, facility inspections and GDP audits were conducted with findings and corrective actions maintained on a spreadsheet. The records included verification of the corrective actions and preventive actions where applicable. Records of facility inspections were reviewed from 3/13/2019 and 4/15/2019 and included corrective actions. The staff conducting internal audits were trained in internal auditing with certificates available. Where practical, staff conducting internal audits were independent of the function being audited. However, the facility has a small number of employees.</p>			
2.6.1 Product Identification	2.6.1.1	Compliant	
	2.6.2.1	Compliant	

SECTION	ELEMENT	PRIMARY RESPONSE	EVIDENCE
	2.6.2.2	Compliant	
<p><i>Section Summary:</i> The facility has implemented methods for product identification. Products were received in their original packaging and were not taken out of the original packaging. Pallets received get a license plate label to track the product through the facility. Product locations and information was maintained in the WMS system.</p>			
2.6.2 Product Trace	2.6.2.1	Compliant	
	2.6.2.2	Compliant	
<p><i>Section Summary:</i> A trace exercise was initiated by the auditor during the audit. A pallet of Pickled Beets license plate number 0171319 was observed being loaded during the audit. The load the pallet was received on was selected for the trace exercise. 245 cases were received 3/20/2019. 147 cases were inventory. 49 cases (1 pallet) shipped 5/1/2019 and 49 cases shipped during the audit on 5/15/2019. 100% of the product was accounted for in less than 30 minutes.</p>			
2.6.3 Product Withdrawal and Recall	2.6.3.1	Compliant	
	2.6.3.2	Compliant	
	2.6.3.3	Compliant	
	2.6.3.4	Compliant	
	2.6.3.5	Compliant	
<p><i>Section Summary:</i> The Taylor Logistics Recall program 2.13 dated 3/29/2019 describes the requirements for recalling items. The facility is a Third Party Public Warehouse and does not take ownership of the product. Recalls would be initiated by the supplier/owner. The company would track product and provide information to the product owner/customer within 2 hours of a request when notified of a recall and aid in retrieving the product. The President of the company was responsible for external communications in a recall situation. The recall program includes the requirements for completing two mock recalls per year. Records were reviewed for a mock recall conducted 1/10/2019. Dry Soda Island Fruit item number 8084 lot number 18288 was selected. 3,410 cases were received over four shipments. 100% was traced to shipments and 2,949 cases still in inventory. The exercise took one hour to complete. The facility reported that it has not processed any actual recalls since moving into the facility. Contact information was available for SQFI and the certification body along with the requirement for 24 hour notification.</p>			
2.7.1 Food Defense Plan	2.7.1.1	Compliant	
	2.7.1.2	Compliant	
	2.7.1.3	Compliant	
	2.7.1.4	Compliant	
<p><i>Section Summary:</i> The Food Defense policy document 2.7 dated 5/13/2019 describes the food defense program including physical security, chemicals, employee screening, inbound procedures, restricted access and other items. The President of the company was identified as the Food Defense Coordinator. The Food Defense Trailer Sealing policy describes requirements for trailer security. Employees break the seal on inbound trailers and compare to the BOL. Seals were not required on LTL shipments. A food defense vulnerability assessment was completed 1/17/2019. The facility conducts a monthly food defense inspection which includes challenging doors. Access to the facility was secure. Visitors were required to wear a visitors badge and safety vest. The food defense program has been effectively implemented as evidenced by observations and records reviewed.</p>			
2.7.2 Food Fraud	2.7.2.1	Compliant	
	2.7.2.2	Compliant	
	2.7.2.3	Compliant	
<p><i>Section Summary:</i> The Food Fraud policy 2.21 dated 1/28/2019 described the food fraud program. A food fraud assessment was conducted 1/9/2019 with the aid of a consultant. The assessment concluded that the risk of food fraud was very low. The facility does not own the product. The facility consigns with the product owners for storage and distribution. The customer is also the supplier. This minimizes the motive for economic gain from food fraud.</p>			
2.8.1 Allergen Management	2.8.1.1	Compliant	

SECTION	ELEMENT	PRIMARY RESPONSE	EVIDENCE
<p><i>Section Summary:</i> The Allergen Control Plan document 1.1 dated 1/4/2019 describes allergen controls. All products in the facility were stored in sealed containers. The allergen program addresses allergen spills. The allergen control program was effectively implemented as evidenced by observations. The warehouse did not have racks and products were not stored on top of other products.</p>			
2.9.1 Training Requirements	2.9.1.1	Compliant	
	2.9.1.2	Compliant	
<p><i>Section Summary:</i> The Training Program document 13.6 dated 1/29/2019 describes the training requirements. Training topics were listed in the program including GDP requirements, CAPA, outgoing inspection, foreign material control, pest control, incoming goods, sanitation, allergens, HACCP/SQF, job specific training and other topics. SQF and general HACCP training was conducted 3/13/2019 for most employees. The training was conducted 5/9/2019 for the employee interviewed receiving a load of product during the audit.</p>			
2.9.2 Training Program	2.9.2.1	Compliant	
<p><i>Section Summary:</i> The training program covers various topics related to the implementation of the SQF System including GDPs and pre-requisite programs. GDP training was conducted 12/21/2018 and other dates. Outgoing inspection training was conducted 1/16/2019 and other dates. Incoming goods training was conducted 1/29/2019 and other dates. The training matrix includes the training dates of training topics covered.</p>			
2.9.3 Instructions	2.9.3.1	Compliant	
<p><i>Section Summary:</i> Instructions were available for tasks critical food safety and product protection.</p>			
2.9.4 HACCP Training Requirements	2.9.4.1	Compliant	
<p><i>Section Summary:</i> The SQF Practitioners completed external HACCP training through the International HACCP Alliance Oct. 9 - 10, 2012. The food safety plan did not have critical control points. General HACCP training was provided to employees.</p>			
2.9.5 Language	2.9.5.1	Compliant	
<p><i>Section Summary:</i> Training was conducted in English. All employees understood English.</p>			
2.9.6 Refresher Training	2.9.6.1	Compliant	
<p><i>Section Summary:</i> The facility has established an annual refresher training frequency. Initial training had been completed. The company has not been in the building for a year and this was an initial SQF facility audit.</p>			
2.9.7 Training Skills Register	2.9.7.1	Compliant	
<p><i>Section Summary:</i> The facility maintains a training matrix which includes the employee name, training topics, dates of training completed and the name of the trainer. A training verification date and signature was documented. Group training sessions were conducted with a list of questions for each training topic.</p>			
12.1.1 Premises Location and Approval	12.1.1.1	Compliant	
	12.1.1.2	Compliant	
<p><i>Section Summary:</i> The location of the premises did not present a food safety risk. The facility was located in a light industrial area. The facility has register with FDA and additional licenses were posted in the facility.</p>			
12.2.1 Materials and Surfaces	12.2.1.1	Not Applicable	The facility does not recoup product and there were no food contact surfaces.
<p><i>Section Summary:</i> The facility does not recoup product and there were no food contact surfaces.</p>			
12.2.2 Floors, Drains and Waste Traps	12.2.2.1	Compliant	
	12.2.2.2	Compliant	
	12.2.2.3	Not Applicable	The facility does not have waste trap systems.
<p><i>Section Summary:</i> Floors were maintained in good condition. Drains did not present a hazard. Drains were not located in the warehouse. There were drains in the restrooms. The facility does not have waste trap systems.</p>			

SECTION	ELEMENT	PRIMARY RESPONSE	EVIDENCE
12.2.3 Walls, Partitions, Doors and Ceilings	12.2.3.1	Compliant	
	12.2.3.2	Compliant	
	12.2.3.3	Compliant	
	12.2.3.4	Compliant	
<p><i>Section Summary:</i> Walls, ceilings and doors were maintained in good condition. Wall to wall and wall to floor junctions were clean. There were no drop ceilings in the warehouse.</p>			
12.2.4 Lighting and Light Fittings	12.2.4.1	Compliant	
	12.2.4.2	Compliant	
	12.2.4.3	Compliant	
<p><i>Section Summary:</i> Lighting throughout the warehouse was protected and of sufficient intensity to allow employees to carry out their jobs.</p>			
12.2.5 Dust, Insect and Pest Proofing	12.2.5.1	Compliant	
	12.2.5.2	Compliant	
	12.2.5.3	Compliant	
	12.2.5.4	Compliant	
<p><i>Section Summary:</i> External windows, doors and other openings were effectively sealed when closed. Personnel access doors were fitted with a self-closing device and kept locked. Dock doors were observed to be closed when not in use. The pest control operator conducts every other week inspections of interior rodent traps and monthly inspections of the exterior rodent bait stations.</p>			
12.2.6 Ventilation	12.2.6.1	Compliant	
	12.2.6.2	Compliant	
<p><i>Section Summary:</i> There was adequate ventilation in the facility. Ventilation equipment was maintained in good condition.</p>			
12.2.7 Equipment, Utensils and Protective Clothing	12.2.7.1	Compliant	
	12.2.7.2	Not Applicable	Protective clothing was not required. The facility does not perform reoup activities. The facility does not have any exposed products.
	12.2.7.3	Not Applicable	The facility does not perform reoup activities. The facility does not have any exposed products.
<p><i>Section Summary:</i> Material handling equipment was maintained in good condition. There was no other product handling equipment. Cleaning utensils were maintained in good condition. Protective clothing was not required. The facility does not perform reoup activities. The facility does not have any exposed products.</p>			
12.2.8 Premises and Equipment Maintenance	12.2.8.1	Compliant	
	12.2.8.2	Compliant	
	12.2.8.3	Compliant	
	12.2.8.4	Compliant	
	12.2.8.5	Compliant	

SECTION	ELEMENT	PRIMARY RESPONSE	EVIDENCE
	12.2.8.6	Compliant	
	12.2.8.7	Compliant	
	12.2.8.8	Compliant	
	12.2.8.9	Compliant	
	12.2.8.10	Compliant	
<p><i>Section Summary:</i> The Maintenance Program document 6.2 dated 4/15/2019 described the maintenance program including the control of tools and parts, product controls and a maintenance schedule. An Equipment Breakdowns policy 6.3 dated 2/12/2019 was also available. Maintenance activities were generally performed by contractors including material handling equipment and docks. Some routine tasks were completed internally such as inspecting battery charging stations, inspecting eyewash stations and inspecting fire risers. There were no coolers or freezer in the facility. A Master Maintenance Schedule document 6.7 dated 1/10/2019 was available. The schedule included maintenance tasks and frequency of completion. Records of scheduled maintenance were reviewed from 1/24/2019 for the dock levelers, 2/6/2019 for the vehicle restraints. A spreadsheet was maintained showing the PM date for each piece of material handling equipment. The Temporary Repairs document 6.8 dated 2/9/2017 described methods used to control temporary repairs. A Work Order form was used to document maintenance activities. Work orders dated 3/22/2019 to repair a vent, 4/17/2019 to replace brush seals and 4/23/2019 to replace an eyewash station were available for review. The work orders included verification of cleaning, accounting for tools and parts and proper notification. An Equipment Hold Log was also available. Temporary repairs were not observed during the audit. Paint was maintained in good condition and used on food contact surfaces.</p>			
12.2.9 Calibration	12.2.9.1	Compliant	
	12.2.9.2	Not Applicable	The facility does not have equipment requiring calibration for food safety or regulatory reasons.
	12.2.9.3	Compliant	
	12.2.9.4	Compliant	
	12.2.9.5	Compliant	
	12.2.9.6	Compliant	
<p><i>Section Summary:</i> The facility has a Calibration policy 4.4 dated 1/21/2019. The facility does not have equipment requiring calibration for food safety or regulatory reasons. The facility does not have refrigerated storage. The facility does have two scales that were calibrated 1/21/2019 by an outside calibration contractor. The scales were used to verify customer set up of products. The calibration frequency was established as annually with calibration each January. The scales were adequately protected against damage.</p>			
12.2.10 Pest Prevention	12.2.10.1	Compliant	
	12.2.10.2	Compliant	
	12.2.10.3	Compliant	
	12.2.10.4	Minor	The pest control operator used Suspend SC on 4/5/2019. Suspend SC was not on the approved pesticide list.
	12.2.10.5	Compliant	
	12.2.10.6	Compliant	
	12.2.10.7	Not Applicable	Pesticides were not stored on site.
	12.2.10.8	Compliant	
	12.2.10.9	Compliant	

SECTION	ELEMENT	PRIMARY RESPONSE	EVIDENCE
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Section Summary: Minor: The pest control operator used Suspend SC on 4/5/2019. Suspend SC was not on the approved pesticide list. The Pest Control Program 10.4 dated 4/8/2019 describes the pest control program. The facility uses a contracted pest control company, Terminix, for pest control services. The interior rodent traps were serviced every other week and the exterior rodent bait stations were serviced monthly. A pest control device map dated 1/23/2019 was current. The facility has 60 interior rodent traps, 8 insect light traps, 8 pheromone traps and 34 exterior rodent bait stations. The pest control contractor maintains a Pesticide Business License number 93095 expiring 9/30/2019 and uses licensed Commercial Applicators. The SQF Practitioner was also a licensed Commercial Applicator. Current liability insurance was available expiring 1/1/2020. Pest control inspection records were reviewed from 1/4/2019, 2/1/2019, 3/7/2019, 4/5/2019 and 5/3/2019. The records included the interior devices and the exterior rodent bait stations. A pesticide usage log was maintained and a Safety Data Sheet was verified to be available for Generation Mini-Block (7173-218) and Suspend SC (432-763). An annual assessment of the pest control program was completed 1/4/2019. The ILT bulbs were replaced 1/14/2019. The facility does not store pesticides on site and the pest control operator was responsible for disposing of unused pest control chemicals and empty containers. No pest activity was observed during the audit.

12.2.11 Cleaning and Sanitation	12.2.11.1	Compliant	
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	12.2.11.2	Compliant	
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	12.2.11.3	Compliant	
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	12.2.11.4	Compliant	
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	12.2.11.5	Not Applicable	There were no food contact surfaces or food processing equipment in the facility and the facility did not mix chemicals or measure chemical concentrations. The facility does not store raw proteins.
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	12.2.11.6	Compliant	
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	12.2.11.7	Compliant	
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Section Summary: The facility was observed to be clean during the audit. The Sanitation Program 11.6 dated 1/25/2019 describes the methods and responsibilities for cleaning. A Master Cleaning Schedule was available with monthly, quarterly, semi-annual and annual tasks. A Daily Cleaning Schedule was used for daily tasks. Cleaning procedures were available. Cleaning records were reviewed for monthly cleaning of the dock aprons on 4/26/2019 and 5/6/2019, cleaning the wrap machines 4/17/2019 and a semi-annual cleaning of the floor drains 4/24/2019. A quarterly cleaning of the electrical panels was completed 3/22/2019. The cleaning records were maintained on a spreadsheet with the initials of the person completing the task along with comments. Daily cleaning records were reviewed from February 4 - 6, 2019, March 5 - 7, 2019, April 24 - 26, 2019. The daily records were maintained on paper. A Scrubber Pre-operational check list was also available and completed on days the floor scrubber was used. The facility does not have racks other than for storing forklift batteries. An approved list of cleaning chemicals was available and described the approved use for the chemical. Monthly GDP self-inspection were performed to verify the effectiveness of the cleaning program. Safety Data Sheets were verified to be available for Uline Toilet Bowl Cleaner and Green Works Glass and Surface Cleaner. The cleaning chemicals were properly stored in a secure room. A chemical inventory was maintained. There were no food contact surfaces or food processing equipment in the facility and the facility did not mix chemicals or measure chemical concentrations. The facility does not store raw proteins. There were no special requirements for the disposal of empty cleaning chemical containers. The facility uses small volume containers that can be discarded in the trash when empty. Sanitation training was conducted 1/31/2019 and other dates.

12.3.1 Personnel	12.3.1.1	Compliant	
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	12.3.1.2	Compliant	
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	12.3.1.3	Compliant	
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	12.3.1.4	Compliant	
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Section Summary: Personnel with infectious diseases were not permitted to work in food handling activities. The Personnel Hygiene policy 4.14 dated 1/7/2019 addresses cuts, scrapes and sores and the control of blood. The policy also addresses smoking and the use of tobacco products. A separate Bodily Fluids Control Program 4.14a dated 4/11/2019 was available. Food and drinks were addressed in the GDP policy 4.9 dated 12/17/2018. These programs have been effectively implemented as evidenced by observations. No eating, drinking, spitting or tobacco use was observed in the warehouse. No exposed cuts or bodily fluids were observed.

12.3.2 Hand Washing	12.3.2.1	Compliant	
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	12.3.2.2	Compliant	
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SECTION	ELEMENT	PRIMARY RESPONSE	EVIDENCE
	12.3.2.3	Compliant	
	12.3.2.4	Not Applicable	Gloves were not required. The facility does not handle exposed food products or food contact surfaces.
<p><i>Section Summary:</i> The Personnel Hygiene policy 4.14 addresses hand washing requirements. Hand wash sinks were made of non-corrosive materials and supplied with potable water with controlled temperatures, liquid soap and paper towels to dry hands. Employees were observed washing their hands prior to entering the warehouse. Hand wash signage was posted in English at the main hand wash sink when entering the warehouse. Gloves were not required. The facility does not handle exposed food products or food contact surfaces.</p>			
12.3.3 Clothing	12.3.3.1	Compliant	
	12.3.3.2	Compliant	
<p><i>Section Summary:</i> Clothing worn by employees was clean and maintained in good condition. Employees wear clothing from home and also wear a vest (or company issued shirt) in the warehouse.</p>			
12.3.4 Jewelry and Personal Effects	12.3.4.1	Not Applicable	The facility does not recoup product and does not have any areas where product is exposed.
<p><i>Section Summary:</i> The facility does not recoup product and does not have any areas where product is exposed. The Personnel Hygiene policy does address jewelry should these activities take place.</p>			
12.3.5 Visitors	12.3.5.1	Compliant	
	12.3.5.2	Compliant	
	12.3.5.3	Compliant	
	12.3.5.4	Compliant	
	12.3.5.5	Compliant	
<p><i>Section Summary:</i> The facility has established a Visitors Policy 2.17 dated 8/3/2018. Visitors were required to sign in to the facility and follow hygiene requirements. Visitors with visible signs of illness were not observed. A driver cage was available allowing drivers access into the facility, but not beyond the cage.</p>			
12.3.6 Staff Amenities	12.3.6.1	Compliant	
<p><i>Section Summary:</i> Staff amenities had adequate ventilation and lighting and were available for all persons working in the facility.</p>			
12.3.7 Change Rooms	12.3.7.1	Not Applicable	The facility does not have any change rooms. Employees wear clothing from home.
	12.3.7.2	Compliant	
<p><i>Section Summary:</i> The facility does not have any change rooms. Employees wear clothing from home. Personal items including lunches were stored in the break room.</p>			
12.3.8 Sanitary Facilities	12.3.8.1	Compliant	
	12.3.8.2	Compliant	
	12.3.8.3	Compliant	
<p><i>Section Summary:</i> Toilet rooms were easily accessible to staff. The toilet rooms were separated by distance and a guard rail from food storage areas. There was a sufficient number for the number of employees. The toilet rooms were observed to be clean. There were no drains in the warehouse and sanitary drains were not connected to drains in the warehouse. Hand wash basins were located inside the toilet rooms and were properly designed to allow for effective hand washing.</p>			
12.3.9 Lunch Rooms	12.3.9.1	Compliant	
	12.3.9.2	Compliant	
<p><i>Section Summary:</i> The lunch room was located away from food storage areas near the offices. The lunch room was observed to be clean. A hand wash sign was posted at the exit to the lunch room.</p>			

SECTION	ELEMENT	PRIMARY RESPONSE	EVIDENCE
12.4.1 Staff Engaged in Food Handling and Repack/Recoup Operations	12.4.1.1	Not Applicable	The facility does not perform recoup activities and does not have exposed product.
	12.4.1.2	Compliant	
<i>Section Summary:</i> The facility does not perform recoup activities and does not have exposed product. Foreign material control, allergens, sanitation and other topics were included in the refresher training topics to ensure personnel handled product in a way to prevent damage and contamination.			
12.5.1 Water Supply	12.5.1.1	Compliant	
	12.5.1.2	Compliant	
<i>Section Summary:</i> The facility uses municipal water supplied by the Butler County Water and Sewer. An 2017 annual water report was available. There were adequate supplies of water for cleaning the facility. The facility has only dry products stored at ambient temperatures and water usage was minimal.			
12.5.2 Monitoring Water Microbiology and Quality	12.5.2.1	Compliant	
	12.5.2.2	Compliant	
<i>Section Summary:</i> The facility relies on the annual water report to confirm that the water supply is potable and meets microbiological standards. The facility does not have food contact surfaces and does not have exposed products. All products were maintained at ambient temperatures. The only use of water in the warehouse was the floor scrubber. The facility does not use ice.			
12.5.3 Water Delivery	12.5.3.1	Compliant	
	12.5.3.2	Not Applicable	The facility did not use non-potable water.
<i>Section Summary:</i> The facility back flow prevention device was tested by an outside contractor 9/4/2018. The facility did not use non-potable water.			
12.5.4 Ice Supply	12.5.4.1	Not Applicable	The facility does not use ice in the process.
<i>Section Summary:</i> The facility does not use ice in the process.			
12.5.5 Analysis	12.5.5.1	Not Applicable	The facility does not use water or ice that comes in contact with food or food contact surfaces.
	12.5.5.2	Not Applicable	The facility does not use water or ice that comes in contact with food or food contact surfaces.
<i>Section Summary:</i> The facility does not use water or ice that comes in contact with food or food contact surfaces.			
12.5.6 The Quality of Air and Other Gases	12.5.6.1	Not Applicable	The facility does not use compressed air or other gases that comes in contact with food or food contact surfaces.
	12.5.6.2	Not Applicable	The facility does not use compressed air or other gases that comes in contact with food or food contact surfaces.
<i>Section Summary:</i> The facility does not use compressed air or other gases that comes in contact with food or food contact surfaces.			
12.6.1 Storage and Handling of Goods	12.6.1.1	Compliant	
	12.6.1.2	Compliant	
	12.6.1.3	Compliant	

SECTION	ELEMENT	PRIMARY RESPONSE	EVIDENCE
<p><i>Section Summary:</i> The facility implemented a Storage Practices policy 4.17 dated 1/7/2019 describing the storage plan. The plan was effectively implemented as evidenced by observations. All products in the facility were stored at ambient temperatures. The facility did not have coolers or freezers and did not store ice. The Inventory Rotation and Accuracy policy 4.11 dated 8/13/2018 describes stock rotation requirements. The facility uses first-expired, first-out (FIFO) as the default method of stock rotation for food products. The products stored on site are owned by the customer and other stock rotation methods were used depending on customer requirements. No out of date food products were observed. The customer owns the product and is responsible for maintaining proper inventory to ensure products are shipped within their designated shelf life.</p>			
12.6.2 Cold Storage, Freezing and Chilling of Foods	12.6.2.1	Not Applicable	The facility does not have any cold storage areas.
	12.6.2.2	Not Applicable	The facility does not have any cold storage areas.
	12.6.2.3	Not Applicable	The facility does not have any cold storage areas.
	12.6.2.4	Not Applicable	The facility does not have any cold storage areas.
	12.6.2.5	Compliant	
<p><i>Section Summary:</i> The facility does not have any cold storage areas. The loading dock area was part of the warehouse and designed to protect the product from the weather and other hazards.</p>			
12.6.3 Storage of Shelf Stable Packaged Goods	12.6.3.1	Compliant	
	12.6.3.2	Compliant	
	12.6.3.3	Compliant	
<p><i>Section Summary:</i> The facility has one large warehouse area for the storage of food and non-food products. The food products were stored in one area. Racks were not used for storing food products. Vehicles used in the warehouse did not present a food safety hazard.</p>			
12.6.4 Storage of Equipment and Containers	12.6.4.1	Minor	Webbing and dead insects were observed on a large guard being stored for a customer on the east side of the building. There were other items in this area that had webbing and dust on them.
<p><i>Section Summary:</i> Minor: Webbing and dead insects were observed on a large guard being stored for a customer on the east side of the building. There were other items in this area that had webbing and dust on them.</p>			
12.6.5 Storage of Hazardous Chemicals and Toxic Substances	12.6.5.1	Compliant	
<p><i>Section Summary:</i> Cleaning chemicals were stored in a secure room and did not present a hazard to food products. The chemicals were kept in their original containers. The facility stores only shelf stable products at ambient temperatures and the warehouse dry cleaned with the exception of the floor scrubber which does not use chemicals. Only small quantities of chemicals were kept on site.</p>			
12.6.6 Alternative Storage and Handling of Goods	12.6.6.1	Not Applicable	The facility does not use alternative or temporary storage of goods.
<p><i>Section Summary:</i> The facility does not use alternative or temporary storage of goods.</p>			
12.6.7 Loading, Transport and Receiving Practices	12.6.7.1	Compliant	
	12.6.7.2	Not Applicable	There were no trailer washing areas. The facility does not own the trailers or containers used.
	12.6.7.3	Compliant	
	12.6.7.4	Compliant	
	12.6.7.5	Compliant	

SECTION	ELEMENT	PRIMARY RESPONSE	EVIDENCE
<p><i>Section Summary:</i> The shipping, receiving and storage practices have been effectively implemented as evidenced by observations, records reviewed and employee interviews. Food products were kept in their original sealed packages and no uncontrolled biological, chemical or physical risks were observed. There were no trailer washing areas. The facility does not own the trailers or containers used. The Inbound Inspection SOP 5.3 dated 1/9/2019 describes the requirements for inspecting inbound trailers and product. The Inbound Inspection Form 5.2 dated 1/30/2019 was used to document trailer and product inspections as well as seal numbers. Trailers observed were maintained in good condition. The Inbound Receiving and Put Away policy 5.5 dated 8/13/2018 describes the process of identifying and putting product away when received. The Shipping Procedures 9.11 dated 1/25/2019 describes the requirements and procedure for shipping product. The Outbound Product Inspection policy 9.7 and Outbound Trailer Inspection 9.7a policies address the inspection of product and trailer for outbound shipments. Outbound trailer inspections were documented on the Product Release Form 9.9 dated 10/18/2018. Records of inbound and outbound inspections were reviewed from 1/8/2019 (inbound), 1/10/2019 (inbound and outbound), 2/4/2019 (outbound), 2/6/2019 (outbound), 2/7/2019 (outbound), 2/8/2019 (inbound and outbound), 3/4/2019 (inbound), 3/5/2019 (outbound), 3/6/2019 (inbound and outbound), 3/7/2019 (inbound), 5/1/2019 (inbound), 5/7/2019 (outbound), 5/8/2019 (outbound), 5/9/2019 (outbound), 5/13/2019 (inbound and outbound). The records demonstrated compliance to the requirements.</p>			
12.6.8 Staging and Loading	12.6.8.1	Compliant	
	12.6.8.2	Compliant	
	12.6.8.3	Not Applicable	The facility does not use refrigerated trailers for shipping product.
<p><i>Section Summary:</i> Trailer inspections were conducted for each outbound load to ensure they are clean and in good repair. Staging and loading practices were designed to minimize unnecessary exposure of the product. The staging areas were near the docks used for shipping product. All products were maintained at ambient temperatures.</p>			
12.6.9 Transport	12.6.9.1	Not Applicable	The facility does not ship products under refrigerated conditions.
<p><i>Section Summary:</i> The facility does not ship products under refrigerated conditions.</p>			
12.7.1 Process Flow	12.7.1.1	Compliant	
<p><i>Section Summary:</i> The process flow was designed to prevent cross contamination. The warehouse has all dry storage at ambient temperatures in one large room. There were no high risk areas. The facility does store non-food products with food and non-food products stored in different areas, although there was no physical separation of the areas.</p>			
12.7.2 Receiving	12.7.2.1	Not Applicable	The facility does not receive refrigerated products.
	12.7.2.2	Compliant	
<p><i>Section Summary:</i> The facility does not receive refrigerated products. Receiving practices observed were designed to minimize the unnecessary exposure of the product. The facility only receives sealed product. An employee performing receiving activities during the audit was interviewed and was able to describe and demonstrate the receiving procedure.</p>			
12.7.3 Control of Foreign Matter	12.7.3.1	Compliant	
	12.7.3.2	Compliant	
	12.7.3.3	Minor	The insect light traps were not included on the glass map.
	12.7.3.4	Compliant	
	12.7.3.5	Compliant	
<p><i>Section Summary:</i> Minor: The insect light traps were not included on the glass map. The facility implemented a Glass and Foreign Materials policy 3/1 dated 4/26/2019 describing the control of glass and foreign material. Monthly GDP audits were conducted and included glass inspection. Wood pallets were maintained in good condition. Loose metal objects were not observed in the warehouse.</p>			
12.7.4 Managing Foreign Matter Contamination Incidents	12.7.4.1	Compliant	
	12.7.4.2	Compliant	

SECTION	ELEMENT	PRIMARY RESPONSE	EVIDENCE
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Section Summary: The Glass and Foreign Materials policy addresses instances of foreign material contamination. The policy states that the affected product will be isolated and inspected. The owner of the product will be notified and included in the disposition of the product. Glass breakage cleaning and inspection requirements were documented. The facility reported to have not had any glass breakage incidents since moving into the facility.

12.8.1 Dry and Liquid Waste Disposal	12.8.1.1	Compliant	
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	12.8.1.2	Compliant	
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	12.8.1.3	Compliant	
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	12.8.1.4	Compliant	
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	12.8.1.5	Not Applicable	The facility does not designate inedible waste for animal feed.
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Section Summary: The Waste Control policy 14.4 dated 1/22/2019 describes how the facility controls waste. Waste was observed to be properly controlled and was not allowed to build up in the warehouse. Waste containers were maintained in good condition. A daily Pre-Op form was completed and included a review of waste. The facility does not designate inedible waste for animal feed.

12.9.1 Grounds and Roadways	12.9.1.1	Compliant	
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	12.9.1.2	Compliant	
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	12.9.1.3	Compliant	
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Section Summary: The exterior grounds were maintained in good condition. Vegetation was controlled. Parking lots and exterior dock areas were paved. Low areas with standing water were not observed. Trash and debris were not observed.