

FAMI-QS V6 and Feed Fraud Prevention & Defence Module								
Certification Application Form								
Date:								
Company Name:			Number of full time employees who will be involved in FAMI QS activities:					
Correspondence Address:			Please give the details of a shift patterns on site:	ny				
Telephone Number:			Mobile No:					
Contact Name:			Contact Position:					
E-mail:			VAT Number:					
Company Numbe	r:							
Deputy Contact N	lame:		Deputy Contact Number:					
Please give details certifications held:								
Please submit your FAMI QS Scope Approval Spreadsheet along with this application which details the products you wish to include in the audit								
RAW MATERIALS – please confirm the number of raw materials which are sourced from an unassured supplier – details of the certification schemes that FAMI QS recognise can be found at: <a href="https://www.fami-qs.org/famiqs/sites/default/files/files/Code%20V.6/P-MS-003_Recognized_Standards_V2_Rev2.pdf">https://www.fami-qs.org/famiqs/sites/default/files/files/Code%20V.6/P-MS-003_Recognized_Standards_V2_Rev2.pdf</a>								
TRADED PRODUCTS ONLY  For details of the FAMI QS Process types please see: <a href="http://www.fami-qs.org/code-6-0.html">http://www.fami-qs.org/code-6-0.html</a>								
Product name	Company name sold under	Supplier Name	Does the supplier hold certification to a recognised scheme? *	Please confirm the certification in place	Production process			

Please return to

Kiwa Agri Food, The Inspire, Hornbeam Square West, Harrogate, North Yorkshire. HG2 8PA

Tel: 01423 878878 Email: feed@kiwa.co.uk





Please confirm the Feed Chain Category Classification:								
DI - Products fed directly to the animal and / or delivered to the farm								
K – Products not fed directly to animals and / or not sold directly to the farm								
FI – Applicants trading their own products under their own brand								
FII – Applicants trading products not produced by themselves under the manufacturers brand								
Do you subcontract any part of your production process to another business? If so please provide the businesses name, details on the activity performed and certification that the business holds. Please submit your audit report from this operation.								
Please confirm which country the	se products are placed on the	market in.						
Please confirm the address from	which the products are placed	on the market.						
Please confirm that the audit car	Please confirm that the audit can be conducted in English:							
Please give details of any planne unannounced audit programme		wa Agri Food must be kept informed of these to facilitate the						
Production site address:								
Approximate size of site								
Additional site addresses:								
Approximate size of site								
Activity at this address: Please confirm whether this site is managed under the same feed safety and quality management system as the main site.								
Completed by:	D	ate						

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I wish to apply for certification to the FA	AMI QS Standard a	nd the Feed Fraud P	revention and Defence Module.			
I understand that I must pay the audit/o Agri Food will send a quotation with de			tion provided in this Application Form, Kiwa			
I expect to be ready for my Assessment	t during	(month/year)	)			
We expect you to be familiar with the r	elevant code(s) of	practice (http://ww	/w.fami-qs.org/)			
Signed	Position		Date			
Does your organisation have a Modern	slavery Policy in p	lace Y/N				
Does your organisation have a Anti Brib	oery Policy in place	Y/N				
Kiwa Agri Food Office Use Only:						
Application review outcome:						
Accepted for audit ? Y / N						
Signed		Date				

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