



PGFS Certification Application

Form# 004a
 Revised By TS
 Revision Date 1/13/25
 Revision# 027
 Supersedes 3/20/24

The PrimusGFS scope is focused on Food Safety within the Agricultural sector, including horticultural, grains and pulses designed for human consumption. Please complete this application and return it to CCI by email, fax, or mail. If you have any questions, please contact CCI. Thank you!

Please check one applying for: ☐ PrimusGFS Certification Audit ☐ Pre-Assessment Audit ☐ Other

CLIENT CONTACT DETAILS

COMPANY NAME (LLC, Corp, etc.)			
TRADE NAME		Is your company part of a larger, legal entity? If so who?	<input type="checkbox"/> Yes <input type="checkbox"/> No
AUTHORIZED CONTACT		TITLE	
PHYSICAL ADDRESS (also provide ranch/field addresses)		MAILING ADDRESS	
PHONE NUMBER		FAX NUMBER	
MOBILE NUMBER		EMAIL ADDRESS	
LANGUAGE	<input type="checkbox"/> English <input type="checkbox"/> Other		

BILLING INFORMATION

BILLING CONTACT		BILLING ADDRESS	
BILLING PHONE NUMBER		BILLING EMAIL	

CERTIFICATION INFORMATION

1	Has your organization completed a PrimusGFS audit through an accredited certification body (CB)? If yes, when and who was your CB?	<input type="checkbox"/> Yes <input type="checkbox"/> No
2	Has your organization ever failed a third-party certification inspection? If yes, please provide details:	<input type="checkbox"/> Yes <input type="checkbox"/> No
3	What is your desired audit period (based on seasonality of crop & validity of current certified)?	<input type="checkbox"/> Annual <input type="checkbox"/> Other
4	Approximately when would you like to schedule the audit (provide estimated month and/or date)?	
5	Provide any blackout dates as to when the audit should NOT occur.	
6	Is this inspection required for a specific buyer/shipper? (e.g., Walmart, Costco) ? If yes, please specify name of client/supplier:	<input type="checkbox"/> Yes <input type="checkbox"/> No
7	Would you like the audit reports and certificate(s) sent to this buyer/shipper? (If yes, a \$15 fee will apply to each shipper listed). If so, provide the contact's information (first and last name, email, phone number, complete address):	<input type="checkbox"/> Yes <input type="checkbox"/> No
8	Do you have at least three (3) months worth of documentation to provide during audit? (i.e., water testing records, daily logs, etc.). 3 months of records is recommended to proceed with audit. (Refer to PGFS Interpretation Guideline).	<input type="checkbox"/> Yes <input type="checkbox"/> No
9	Do you have a current copy of the normative documents? (e.g., PrimusGFS regulations, standards, questions, expectations, interpretation guidelines).	<input type="checkbox"/> Yes <input type="checkbox"/> No
10	Do you have a current site map of location(s)? If so, please provide.	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

AUDIT SCOPE

11	What is the <u>entire scope of the audit</u> ? (Specify about type of operation(s), commodities, and processes)		
12	List all products/commodities (conventional &/or organic) to be audited: (commodities must be witnessed during the audit).		
13	Are you requesting like commodities to be certified that <u>will not</u> be present during audit?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
	If yes, please provide details:		
14	Do you have any products, processes or areas to be exempt from the scope of certification?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
	If yes, please explain:		
15	Do you have any activities at any locations other than your primary operation? Include all premises, support buildings, etc.	<input type="checkbox"/> Yes <input type="checkbox"/> No	
	If yes, please explain:		
16	What is/are the country/countries of destination for your commodities?		
	A PGFS audit can not be performed if the commodities are not present in the field and/or your operation is not running during the audit.		
17	What certification category applies to your company? (Refer to Food Certification Categories on final page & check all boxes that apply.)		
	SCOPE: <input type="checkbox"/> BI <input type="checkbox"/> BII <input type="checkbox"/> BIII <input type="checkbox"/> CII <input type="checkbox"/> CIII <input type="checkbox"/> CIV <input type="checkbox"/> G		
18	FIELD OPERATIONS: <input type="checkbox"/> Farm <input type="checkbox"/> Indoor Agriculture <input type="checkbox"/> Harvest Crew Will the optional Integrated Pest Management Module (Module 9) apply? <input type="checkbox"/> Yes <input type="checkbox"/> No		
	FIELD INFO:		
	# of Farms (Fields) to be audited:	Months of Harvest:	# of Field Employees:
	Names of the Farms (Fields) and Acreage of each:		
	Address or GPS points of the Farms (Fields):		
	Do you field pack any commodities?		<input type="checkbox"/> Yes <input type="checkbox"/> No
	If yes, will any field pack commodities be included in this audit scope?		<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
19	HARVEST CREW INFO:		
	# of Harvest Crews (HC) to be audited:	Name of Harvest Crews:	# of HC Employees:
20	What operation/site are you wishing to certify? (Refer to Food Certification Categories on final page & check the boxes that apply.)		
	FACILITY OPERATIONS: <input type="checkbox"/> Packinghouse <input type="checkbox"/> Processing <input type="checkbox"/> Storage & Distribution <input type="checkbox"/> Cooler/Cold Storage Will the optional Preventative Controls Module (Module 7) apply? <input type="checkbox"/> Yes <input type="checkbox"/> No		
	**** Facility Operations (GMP audits) are required to have a traceability exercise during the audit****		
21	FACILITY INFO:		
	Number of Facilities to be audited:	Size of entire Facility (sq. feet):	Months of Operation:
	Number of Coolers and/or Storage to be audited:	Size per Cooler (sq. feet):	Hours of Operation:
22	Have you identified any CCP's within your HACCP plan, if applicable?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	
23	If yes, what are the CCPs?		
24	Do you have a written Hazard Analysis justifying why CCP's do not exist, if applicable?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	
	ALL OPERATIONS:		
25	What is the Water Source and/or Irrigation type used?		
26	How did you hear about CCI?		
<small>CCI prohibits discrimination in employment & services provided on the basis of race, national origin, color, creed, religion, sex, age, disability, veteran status, or sexual orientation.</small> <small>By signing below, you certify the above information is complete and correct to the best of your knowledge and that you agree to comply with the requirements for certification as well as supply any information required during the certification process. Please email, fax, mail your completed form to CCI. Email: tara@ceresci.com Fax: 715-861-6460 Address: PO Box 031, Chippewa Falls, WI 54729</small>			
Signature of Authorized Representative		Date	
CCI Review:		Date: (for CCI Use Only)	

FOOD CERTIFICATION CATEGORIES			
Scope	Category name	Operation Type(s)	Examples of product
BI	Farming of Plants (other than grains and pulses)	<ul style="list-style-type: none"> •Farm •Indoor Agriculture •Harvest Crew 	Growing or harvesting of plants (other than grains and pulses) including horticultural products and hydrophytes for food. On farm storage of plants (other than grains and pulses), including horticultural products and hydrophytes for food.
BII	Farming of Grains and Pulses	<ul style="list-style-type: none"> •Farm •Indoor Agriculture •Harvest Crew 	Growing or harvesting of grains and pulses for food. On farm storage of grains and pulses for food.
BIII	Pre-process handling of plant products, nuts and grains	<ul style="list-style-type: none"> •Storage and Distribution Center •Cooling / Cold Storage •Packinghouse 	Activities on harvested plants, including horticultural products and hydrophytes for food, that keep the products whole and integral. De-shelling of nuts; Drying of grain; Grading of fruit and vegetables; Storage; Cleaning, washing, rinsing, fluming, sorting, grading, trimming, bundling, cooling, hydro-cooling, waxing, drenching, packing, re-packing, staging, storing, loading and / or any other handling activity that does not significantly transform the product from its original harvested form.
CII	Processing of perishable plant products	Processing	Production of plant products, including fruits and fresh juices, vegetables, grains, nuts, pulses and perishable pet food from plant products only. Washing, slicing, dicing, cutting, shredding, peeling, grading, pasteurization, cooking, chilling, juicing, pressing, freezing, packed in modified atmosphere, packed in vacuum packing or any other activity that significantly transforms the product from its original whole state.
CIII	Processing of perishable animal and plant products (mixed products)	Processing	Production of mixed animal and plant products, including ready to eat and perishable pet food. Mixing, cooking, chilling, freezing, packing in modified atmosphere, packed in vacuum packing. (e.g. ready to eat salads with grilled chicken or other meat, frozen foods with both plant and animal ingredients, etc.).
CIV	Processing of ambient stable products	Processing	Production of food products from any source that are stored and sold at ambient temperature, including canned food and ambient stable pet food. Aseptic filling, baking, bottling, brewing, canning, cooking, distilling, drying, extrusion, fermentation, freeze drying, pressing, frying, hot filling, irradiating, milling, mixing and blending, packing in modified atmosphere, packed in vacuum packing, pasteurizing, pickling, roasting, salting and refining.
G	Storage and Distribution services for food.	<ul style="list-style-type: none"> • Storage and Distribution Center 	Storage facilities and distribution vehicles for the storage and transport of food, feed and/ or packaging products. Note: any packing with labelling activities are excluded.
<p><i>Categories Table: Taken from PGFS Guidance Document:</i></p> <p><i>Table 1: GFSI Scopes of Recognition (taken from GFSI v2020.1)</i></p>			