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| **Section 1: Supplier/Manufacturer Details** |
| 1.1) Corporate Name:  |
| 1.2) Facility Address: |
| 1.3) Telephone number:  | Fax number: |
| 1.4) Company website: |
|  |
| 1.5) List of contacts: |
| Title | Name | Phone # | email address |
| Quality assurance manager |  |  |  |
| Production manager |  |  |  |
| Sales manager |  |  |  |
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| 1.6) Do you directly supply product to Krinos? [ ] YES [ ] NO |
| 1.7) Description of products to be supplied to Krinos Foods: |
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| 1.8) Are you a manufacturer, a distributor or a broker? : |
| 1.9) Do you use a co-packer to produce products you supply to Krinos?  | [ ] YES | [ ] NO |
| **If you are a distributor, a broker or use a co-packer, please also send this questionnaire to the actual manufacturer(s)** |
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| 1.10) Products produced in the facility:  |
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| 1.11) Is your facility registered with the FDA? | [ ] YES , **Please provide#** : | [ ] NO |
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| **Section 2: Manufacturing and Quality Control** |
| 2.1) Are you accredited to a GFSI-recognized scheme? [ ] YES, please provide a copy of certification document. Go to question 2.4) [ ] NO, please continue to question 2.2)  |
| 2.2) Do you have a food safety plan or system, HACCP, or any risk management plan? | [ ] YES | [ ] NO |
| 2.3) Is there any annual third party food safety/GMP audit of your facility?[ ] YES, please provide document[ ] NO |
| 2.4) Have you been cited for any regulatory non-compliance issue or received any warning letter in the past 3 years? [ ] YES, please provide details:[ ] NO |
| 2.5) Have you experienced any recall in the past 3 years?[ ] YES, please provide details including recall class:[ ] NO |
| 2.6) Do you use genetically modified organisms (GMO) ingredients?  | [ ] YES | [ ] NO |
| 2.7) Do you handle any of the following allergens and/or its derivatives either as finished products or as raw ingredients in products? **Please give answer to each individual allergen listed below.** |
| Crustaceans (such as shrimp, crab, lobster) | [ ] YES | [ ] NO |
| Eggs | [ ] YES | [ ] NO |
| Fish | [ ] YES | [ ] NO |
| Milk | [ ] YES | [ ] NO |
| Peanuts | [ ] YES | [ ] NO |
| Sesame | [ ] YES | [ ] NO |
| Soy | [ ] YES | [ ] NO |
| Tree nuts (such as almonds, cashews, walnuts, etc.) | [ ] YES | [ ] NO |
| Wheat | [ ] YES | [ ] NO |
| 2.8) Do you have an allergen control program? | [ ] YES | [ ] NO |
| 2.9) Do you have designated OR shared equipment, tools, production line, area for each allergen you handle?  | [ ] Shared equipment and production line | [ ] Designated equipment and production line |
| 2.10) Do you have a foreign object detection system?[ ] YES, If yes please indicate below[ ] Metal Detector[ ] X-ray Machine[ ] Other:  | [ ] NO, please explain how the foreign objects are controlled: |
| 2.11) Do your all finished products pass through a foreign object detection system? | [ ] YES | [ ] NO |
| 2.12) Do you have a documented glass and brittle plastic breakage policy on site? | [ ] YES | [ ] NO |
| 2.13) Do you carry out tests on incoming raw materials and/or finished products? |
| [ ] YES, If yes please indicate below | [ ] NO, if no please skip to question 2.16) |
| [ ] Microbiological testing: |
| [ ] Chemical testing: |
| [ ] Others: |
| 2.14) Do you have your own testing facilities? | [ ] YES | [ ] NO |
| 2.15) Do you use an accredited laboratory for testing of raw materials and/or products? | [ ] YES | [ ] NO |
| Please provide name and address of laboratory |
| Name of laboratory: |
| Address of laboratory: |
| 2.16) How are finished products coded for traceability? Please indicate |
| [ ] Lot number | [ ] Production date | [ ] Expiration date |
| [ ] Others, please specify: |
| 2.17) Do you have a specification for packaging materials? | [ ] YES | [ ] NO |
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| 2.18) Do you monitor temperature of the products throughout the transit? | [ ] YES | [ ] NO |
| 2.19) Do you supply ORGANIC products to Krinos Foods? | [ ] YES, **please provide a copy of certificate** | [ ] NO |
| 2.20) Do you supply KOSHER products to Krinos Foods? | [ ] YES, **please provide a copy of certificate** | [ ] NO |
| 2.21) Do you import/purchase any raw materials from any supplier outside of your country (foreign supplier)? | [ ] YES | [ ] NO |
| 2.22) Do you supply any imported product to Krinos?  | [ ] YES | [ ] NO |
| IF YOU ANSWERED "NO" TO **BOTH** QUESTION **2.21) AND 2.22)**, SKIP TO QUESTION 2.25) |
| 2.23) Do you have a hazard analysis for each food item that is imported? | [ ] YES | [ ] NO |
| 2.24) How do you evaluate the risk of imported products and performance of your import suppliers? |
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| 2.25) Do you inspect all incoming raw materials? | [ ] YES | [ ] NO |
| 2.26) Do you have Sanitation Standard Operating Procedures (SSOPs)? | [ ] YES | [ ] NO |
| 2.27) Do you have a written cleaning schedule (Master Sanitation Schedule) for all areas of the facility? | [ ] YES | [ ] NO |
| 2.28) Are cleaners/sanitation team trained to comply with all health and safety aspects of chemical handling? | [ ] YES | [ ] NO |
| 2.29) Do you have a preventive maintenance program? | [ ] YES | [ ] NO |
| 2.30) Are procedures regularly monitored, reviewed and changed where applicable? | [ ] YES | [ ] NO |
| 2.31) Do you maintain up to date product specifications for all products? | [ ] YES | [ ] NO |
| 2.32) Do you have documented calibration procedures for measuring instruments? | [ ] YES | [ ] NO |
| 2.33) Do you have full traceability of your products including ingredients and packaging materials? | [ ] YES | [ ] NO |
| 2.34) When was your last mock recall/traceability exercise? | Date: |
| 2.35) What is the % effectiveness of your latest mock recall? | %effectiveness:  |
| 2.36) What inspections, testing or analysis are made on finished products and with what frequency? |
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| 2.37) Do you keep records on customer complaints? | [ ] YES | [ ] NO |
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| **Section 3: Pest Control** |
| 3.1) Do you have a pest control contract? |
| [ ] YES >>> | Name of pest control company: |
| [ ] NO>>> | Who is responsible for pest control in your facility? |
| 3.2) How frequent are the pest control inspections being perform? Please specify. |
| [ ] Weekly | [ ] Bi-Weekly | [ ] Monthly | [ ] Other: |
| 3.3) Are pest control records maintained and available for inspection? | [ ] YES | [ ] NO |
| 3.4) Who is responsible for the corrective action for pest control issue? |
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| **Section 4: Personnel Hygiene** |
| 4.1) Are all employees trained in food hygiene and food safety? | [ ] YES | [ ] NO |
| 4.2) Do all employees undergo refresher training annually? | [ ] YES | [ ] NO |
| 4.3) Are training records kept for all employees? | [ ] YES | [ ] NO |
| 4.4) Do you provide protective clothing for all food handlers? | [ ] YES | [ ] NO |
| If yes, please indicate type(s) of protective clothing provided: |
| [ ] Apron | [ ] Boots | [ ] Gowns/Overall | [ ] Hat/Cap |
| [ ] Beard covers | [ ] Gloves | [ ] Hairnet | [ ] Other: |
| 4.5) Is there any reusable protective clothing used?  | [ ] YES | [ ] NO |
| IF YOU ANSWERED "NO" TO QUESTION 4.5), SKIP TO QUESITON 4.8) |
| 4.6) How often are reusable protective clothing changed and cleaned? |
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| 4.7) Who is responsible for reusable protective clothing cleaning? |
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| 4.8) Are lockers available for employees to ensure no personal belongings are taken into production areas? | [ ] YES | [ ] NO |
| 4.9) Are employees provided with separate areas for eating and drinking? | [ ] YES | [ ] NO |
| 4.10) Do you request a medical release documentation or a doctor note from employee who returns to work following illness? | [ ] YES | [ ] NO |
| 4.11) What is the company policy on wearing of jewelry? |
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| 4.12) What is the company policy on smoking? |
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| **Section 5: Procedures for supplier approval** |
| 5.1) Do you have a documented supplier approval program? | [ ] YES | [ ] NO |
| 5.2) Do you audit raw material suppliers? | [ ] YES | [ ] NO |
| 5.3) Do you only use approved suppliers? | [ ] YES | [ ] NO |
| 5.4) Do you require raw material suppliers to provide food safety documentation? | [ ] YES | [ ] NO |
| 5.5) Do you require certificate of analysis (COA) and/or certificate of conformances from your suppliers? | [ ] YES | [ ] NO |
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| **Section 6: Document Checklist** |
| Please use this checklist to ensure all required information has been included with your return. |
| 6.1) Fully completed food safety questionnaire | [ ] YES | [ ] NO |
| 6.2) Letter of continuing guarantee | [ ] YES | [ ] NO |
| 6.3) Product specification sheet **including nutritional data** for every item supplied to KrinosThe supplier:1. Agrees that all products supplied to Krinos Foods LLC. will conform to all current specifications for each of the products. [ ]  YES [ ] NO2. Agrees to inform Krinos Foods LLC. prior to any change to any specification for any of the products listed. [ ] YES [ ] NO3. Agrees to allow access to test/analysis records and/or sample of any batch/lot (if applicable) of product supplied to Krinos Foods LLC. by request. [ ] YES [ ] NO | [ ] YES | [ ] NO |
| 6.4) Food safety Certificate/Third party ***audit certificate* and *report* in ENGLISH language.** Please specify. | [ ] YES | [ ] NO |
| [ ] BRC | [ ] FSSC22000 | [ ] SQF | [ ] Other: |
| 6.5) HACCP plan | [ ] YES | [ ] NO |
| 6.6) Non-GMO statement (if applicable) | [ ] YES | [ ] NO |
| 6.7) Kosher Certificate (if applicable) | [ ] YES | [ ] NO |
| 6.8) Organic Certificate (if applicable) | [ ] YES | [ ] NO |
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| I hereby declare that to the best of my knowledge the answers contained within this questionnaire are true and accurate. |
| this questionnaire is completed by: |
| Name:  |
| Position:  |
| Contact info: |
| Signature:  | Date: |
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| Please send the completed form and supporting document to nuttapornp@krinos.com or upload your documentation in our food safety supply chain system. |
| Please contact Jimmy Tse (jimmyt@krinos.com) or Nuttaporn Pothiwit (nuttapornp@krinos.com) to request your user name and password to access our food safety supply chain system. |
| Thank you very much for your cooperation. |
|  Krinos Foods |