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| **IMPORTER NAME** | | | | | | **DATE** | | | | | |
| **ADDRESS** | | | | | | **QI APPROVAL** | | | | | |
| **FSVP Food Hazard Analysis (HA) Form Example\*** | | | | | | | | | | | |
| **(1)**  **Food/Food Product** | **(2)**  **Identify known and/or reasonably foreseeable food safety hazards B=Biological C=Chemical P=Physical** | | | **(3)**  **Do any**  **food safety hazards**  **require a control?** | | | **(4)**  **If yes, by whom?** | **(5)**  **Justify your decision for column 3** | | **(6)  Describe the nature of the control(s)** | |
| **Yes** | **No** | |
|  | B |  | |  |  | |  |  | |  | |
| C |  | |  |  | |  |  | |  | |
| P |  | |  |  | |  |  | |  | |
|  | B |  | |  |  | |  |  | |  | |
| C |  | |  |  | |  |  | |  | |
| P |  | |  |  | |  |  | |  | |
| **HA Performed by Another Entity (if yes, describe your assessment of HA and include Entity’s name, address, email, and date of HA)?\*\*** | | | | | | |  | | | | |
| ***\*All supporting documentation should be appended to this form***  ***\*\*If another entity performs the HA, you may meet the requirement to determine whether there are any hazards requiring a control in the food by reviewing/assessing the HA performed by that entity. Your review/assessment of the HA must include documentation that the HA was conducted by a QI.*** | | | | | | | | | | | |
| **Importer Approval** | | |  | | | | | | **Approval Date** | |  |