

APPLICATION FOR  
**GEORGIA GOOD AGRICULTURAL PRACTICES  
FOOD SAFETY PROGRAM (GA GAPP)**

**Business Name:** \_\_\_\_\_

**Billing / Mailing Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Physical Address of Audit Site:** \_\_\_\_\_

\_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Food Safety Contact Person(s):** \_\_\_\_\_

**E-Mail(s):** \_\_\_\_\_

**Business Phone:** \_\_\_\_\_ **Fax:** \_\_\_\_\_

**Cellular Phone:** \_\_\_\_\_ **Mobile:** \_\_\_\_\_

**(Optional) Broker or Marketer Name to Appear on Food Safety Certificate WITH You:**

\_\_\_\_\_

**List Commodities grown or packaged in the fields and facilities to be audited:**

\_\_\_\_\_

Please check below signifying you agree to all Terms and Conditions of this agreement.

- I have read the GA GAP Program Standards, Requirements and Administrative procedures.
- I agree to abide by all GA GAP Program Standards, Requirements and Administrative procedures.
- I agree it is my responsibility to notify inspectors or other persons of re-entry intervals for crop treated with pesticides.
- I agree that any known area of non-compliance to the GA GAP Program Standards in my operation will be brought to the attention of the inspectors or other GA GAPP representatives before the audit.
- I agree that no GA GAP program staff member, inspector, board of directors, committee member, officer may be held liable or responsible for any amount in excess of the administrative fees paid. Any monetary claim arising out of or relating to the administration of the program will be settled by arbitration. The GA GAPP committee will choose a representative, the person making the claim will choose a representative, and the two representatives will choose a third party for arbitration. The decision will be final.

I give permission to the GCIA and the GFVGA to publish contact information and to state or imply my participation in the GA GAP Food Safety Program. I give permission for any GCIA or GFVGA representative to audit/inspect my operation for GA GAPP rules compliance.

**Signature of applicant:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Print name:** \_\_\_\_\_ **Title:** \_\_\_\_\_

**The Georgia GAP Food Safety Program is a member service offered by the  
Georgia Fruit and Vegetable Growers Association**

Please select the audit **Brand** and **Scope** for your operation. *Select all that apply:*

**COMBINED Farm and Packing Facility**

**\*\* \$1400 per audit<sup>†</sup>**

*Indicate your combination of selections from the choices below; select all that apply.* Includes field/ranch, harvest crew, AND packing facility operations. This selection can be used for GA GAPP, Primus *or a combination of GA GAPP and Primus audits.* A farm is one operation within a 25 mile radius of the headquarters or packing facility. (GAP and GMP Audits)

**GA GAPP Farm Audit  
(includes Harvest Crew Audit)**

**\$550 per audit<sup>†</sup>**

Includes inspection of the growing areas, harvest crew(s) and/or field pack operations. (GAP Audit)

**GA GAPP Facility Audit**

**\$850 per audit<sup>†</sup>**

Includes inspection of the packing facility, cooling/storage areas, and transportation facilities. (GMP Audit)

**GA GAPP Storage/Cooling Facility Audit**

**\$750 per audit<sup>†</sup>**

This is a facility that does not contain any packing or sorting lines. Produce is **ONLY** received, physical stored, cooled, and/or transported from this facility. (GMP Audit)

**Primus Field / Ranch Audit**

**\$550 per audit<sup>†</sup>**

Includes inspection of the growing areas only. Does not include inspection of harvest crew and/or field pack operations. (GAP Audit)

**Primus Harvest Crew Audit**

**\$195 per audit<sup>†</sup>**

Includes inspection of the harvest crew and/or field pack operations only. Does not include inspection of the growing areas.

**Primus Facility Audit**

**\$850 per audit<sup>†</sup>**

Includes inspection of the packing facility, cooling/storage areas, and transportation facilities. (GMP Audit)

**Primus Storage/Cooling Facility Audit**

**\$750 per audit<sup>†</sup>**

This is a facility that does not contain any packing or sorting lines. Produce is **ONLY** physical stored, cooled, and/or transported from this facility. (GMP Audit)

<sup>†</sup> Plus auditor travel expenses. All auditor travel expenses will be invoiced after the audit.

\*\* To use the Georgia GAP Food Safety Program seal on packaging, farm and packing facility certification is required.

**TOTAL DUE \$ \_\_\_\_\_**

**MAKE CHECKS PAYABLE AND MAIL TO:**

GFVGA  
P.O. Box 2945, LaGrange, GA 30241  
PHONE: 1-877-994-3842  
FAX: (706) 883-8215  
WEBSITE: [www.gfvga.org](http://www.gfvga.org)  
EMAIL: [bbland@asginfo.net](mailto:bbland@asginfo.net)

**Credit Card payment is also accepted:**

€ Visa € MasterCard € AmEx € Discover

Card # \_\_\_\_\_ Exp.Date: \_\_\_\_\_

Name on Card: \_\_\_\_\_

Security Code: \_\_\_\_\_ Billing Zip Code: \_\_\_\_\_

**FOOD SAFETY CONSULTATION:**

	<u>GFVGA Member</u>	<u>GFVGA Non-Member</u>
Initial In-Person Visit*.....	\$290.....	\$590
Additional In-Person Visits*.....	\$50/hr.....	\$75/hr

\* Plus travel expenses. Travel Mileage @ IRS approved rate, plus any lodging & meals