



GFSI TECHNICAL EQUIVALENCE REQUIREMENTS
VERSION 2020

APPLICATION FORM

For applicants to GFSI assessment against GFSI Technical Equivalence Requirements Version 2020

This application form should be filled in once part I of the GFSI Technical Equivalence Requirements has been reviewed, in particular the eligibility criteria.

Section I: Identification of the applicant and scope of application

REQUIRED INFORMATION	GUIDELINES	APPLICANT'S ANSWER
<p>1. Name of Standard in scope for this application, i.e. the name used in audit reports or certificates.</p>	<p><i>Please use the same name that is used on the certificates issued against the Standard</i></p>	
<p>2. GFSI scope(s) of application.</p>	<p><i>You can select more than one scope of acknowledgement. Definitions of each scope is available in part I of the GFSI Technical Equivalence Requirements</i></p>	<ul style="list-style-type: none"> AI Farming of Animals for Meat/ Milk/ Eggs/ Honey AI Farming of Fish and Seafood BI Farming of Plants (other than grains and pulses) BII Farming of Grains and Pulses BIII Pre-process Handling of plant products CO Animal Conversion CI Processing of Perishable Animal Products CII Processing of Plant Perishable Products CIII Processing of Animal and Plant Perishable Products (Mixed Products) CIV Processing of Ambient Stable Products D Production of Feed E Catering FI Retail / Wholesale FII Food Broker / Agent H Provision of Food Safety Services G Provision of Storage and Distribution Services I Production of Food Packaging JI Hygienic Design of Food Buildings and Processing Equipment (for building constructors and equipment manufacturers) JII Hygienic Design of Food Buildings and Processing Equipment (for building and equipment users) K Production of (Bio) Chemicals (Additives, Vitamins, Minerals, Bio-cultures, Flavourings, Enzymes and Processing aids)

3. Registered address of the Standard Owner *Please provide the legal address of the Standard Owner*

4. Business address (Headquarter) of the Standard Owner *If different from the address above.*

5. Additional local offices *Please provide the address of all additional office locations.*

6. Name and position of the authorizing officer *The authorizing officer is the person that is formally responsible for the agreement made and that signs the assessment application*

7. Name and position of Standard Owner application liaison / key contact person *This person will be the primary point of contact for GFSI during the assessment of the Standard Owner*

8. Address / location of application liaison / key contact person

9. Phone number of application liaison / key contact person

10. E-mail address of application liaison / key contact person

11. Date of application *Date when the application was sent to CGF GFSI*

Section II: Verification of the eligibility criteria

REQUIRED INFORMATION	GUIDELINES	APPLICANT'S ANSWER	GFSI ASSESSMENT
1. Name of the legal entity owning the Standard.	<i>Please note that GFSI only accept application for assessment against the GFSI Technical Equivalence Requirements for standards governed or owned by a public or governmental entity</i>		

2. Please provide evidence that the legal entity has a legal status in its jurisdiction and is the owner of the Standard in scope for this application.

*This may include papers / legal constitution documentation.
If the legal entity owning the Standard is different from the entity managing the Standard, please provide clear evidence of the relationship between them.*

3. Please confirm if the Standard is undergoing or about to undergo significant changes. If so, please provide details of those changes

4. Please confirm that you have undertaken a self-assessment to validate that the Standard is in compliance with the GFSI Technical Equivalence Requirements

We confirm that the information provided in the application form and in supporting documents is current and accurate.

SIGNED

for and on behalf of

[insert name of Certification Programme Owner]

SIGNATURE: _____

NAME: _____