

Chubb Agribusiness (California Select Brokers) Supplemental Application for Fruit and Vegetable Growers/Packers/Shippers

Applicant Name:

Agent/ Broker:

PLEASE COMPLETE THIS APPLICATION FOR ALL FRUIT AND VEGETABLE GROWERS/PACKERS/SHIPPERS

	Yes	No
1. Do you pack and/or ship "leafy green" vegetables? (If yes, please complete a & b)	<input type="checkbox"/>	<input type="checkbox"/>
a. Membership in good standing of the LGMA?	<input type="checkbox"/>	<input type="checkbox"/>
b. Copy of most recent LGMA audit attached? (If not attached, must be provided within 60 days of policy issuance)	<input type="checkbox"/>	<input type="checkbox"/>
c. Membership in any other certified organization? Describe:	<input type="checkbox"/>	<input type="checkbox"/>
2. Is there a written worker safety procedure policy in place for packing and shipping operations?	<input type="checkbox"/>	<input type="checkbox"/>
3. Do you provide continuing education to workers?	<input type="checkbox"/>	<input type="checkbox"/>
Please explain all "No" answers for questions 4-12 (In comments section)		
4. Do you test all water used in the packing and washing process?	<input type="checkbox"/>	<input type="checkbox"/>
5. Do you have backup generators or other contingency plans in case of power/refrigeration failure?	<input type="checkbox"/>	<input type="checkbox"/>
6. If you use recycled water, do you test and sanitize the water prior to use?	<input type="checkbox"/>	<input type="checkbox"/>
7. Do you test produce when it arrives from the field?	<input type="checkbox"/>	<input type="checkbox"/>
8. Do you test produce prior to shipping it to the next destination after packing, processing or altering?	<input type="checkbox"/>	<input type="checkbox"/>
9. Are tests performed for Salmonella, E. Coli and Listeria by an outside independent lab?	<input type="checkbox"/>	<input type="checkbox"/>
10. Do tests follow suggested FDA, EPA or other accredited testing methodology?	<input type="checkbox"/>	<input type="checkbox"/>
11. Do you test equipment and storage bin contact surfaces for contamination prior to shipping produce?	<input type="checkbox"/>	<input type="checkbox"/>
12. Are animals prohibited inside the packing plant?	<input type="checkbox"/>	<input type="checkbox"/>
13. Does your employee handbook include procedures for the following: <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div style="width: 45%;"> <input type="checkbox"/> Hair nets <input type="checkbox"/> Removal of all jewelry <input type="checkbox"/> Gloves </div> <div style="width: 45%;"> <input type="checkbox"/> Hand washing prior to contact with food <input type="checkbox"/> Approved sick days for workers in contact with food products <input type="checkbox"/> Light duty away from food products for workers with open wound injuries <input type="checkbox"/> Removal of all objects from pockets </div> </div> <p>Explain any items not checked:</p>		
14. For produce that requires temperature controls, what type(s) of refrigerants are used?		
15. Please explain any special government or industry programs or standards that you are participating in or attempting to qualify for participation in. What procedures are you implementing or have you implemented in regards to this/these programs?		
	Yes	No
16. Have any of your products ever tested positive for contaminants such as E-coli, or Salmonella? Please describe your procedure for handling any positive tests for contaminants:	<input type="checkbox"/>	<input type="checkbox"/>
17. Do you have controlled atmosphere rooms? (<i>Rooms that limit oxygen and suspend vegetable/fruit growth</i>) If yes, explain:	<input type="checkbox"/>	<input type="checkbox"/>
18. Describe the end use of your product. (i.e.: Direct to retail markets; processed into salads or other product; wholesale market)		

19. Any alteration or mixing of products prior to sale or shipment. If yes, describe:	<input type="checkbox"/> <input type="checkbox"/>
20. Product sold direct to public under your own label? If yes, describe:	<input type="checkbox"/> <input type="checkbox"/>
21. Any product sold as certified organic, If yes, describe:	<input type="checkbox"/> <input type="checkbox"/>
22. Any importing or exporting of products handled or distributed? If yes, describe:	<input type="checkbox"/> <input type="checkbox"/>
23. Any contracts with customers or vendors? If yes, do contracts include "hold harmless" provisions in your favor? Describe or attach copy of sample contract.	<input type="checkbox"/> <input type="checkbox"/>
24. Do you have insurance in place for product recall?	<input type="checkbox"/> <input type="checkbox"/>

Comments:

Applicant Signature: _____ Date: _____