



APPLICATION FOR CERTIFICATION SQF Registration Annex

Additional Information

Company Name	
SQF Standard (tick applicable standards)	<input type="checkbox"/> SQF FS Code Ed 8.0 Primary Production <input type="checkbox"/> SQF FS Code Ed 8.0 Manufacturing <input type="checkbox"/> SQF FS Code Ed 8.0 Storage & Distribution <input type="checkbox"/> SQF Quality Code Ed 8.0
Food Sector Categories, Modules and Products. (Ref Section 1.2 SQF ED 8 – relevant FS Code) Documents Safe Quality Food Institute	
Details of SQF Practitioner: Refer SQF Code Ed 8.0 Section 1.5 – <u>MUST BE COMPLETED</u> (If the SQF Practitioner is located at a different site, please supply site contact details)	
Name	
Position Title	
E-mail address	
Estimated Required Date of the Certification/Recertification Audit	

SQFAD Annual Registration FEes

If you are not already registered on the SQF Assessment Database (SQFAD), please register your site: [SQFAD Database Sign-up](#)

Current SQFAD registration/re-re-registration fees for sites can be found on the SQFI website: [SQFI Registration/Re-registration Fee Table](#)

CONTROLLED FORM



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SQF Institute: UNANNOUNCED AUDIT SCHEME

Effective July 2014, SQFI have introduced the Unannounced Audit Scheme. Sites require one (1) Unannounced audit during their Certification cycle. (Refer 4.5 SQF Code Ed 8).

[A] New Suppliers to SQF

Please place an X on one of the boxes below to nominate your SQF Unannounced year:

Initial Audit	Re-certification Audit (1)	Re-certification Audit (2)
N/A		

Note: Initial and Surveillance audits cannot be unannounced.

[B] Transfer Applications from another Certification Body

Please indicate via circling or highlighting the year of your last/previous SQF unannounced audit:

2014 2015 2016 2017 2018 2019 2020 2021 2022

Note: If an SQF Unannounced audit has not yet been conducted please advise on the current agreed SQF unannounced year with your current Certification body:

Year Nominated:

Declaration

I consent to the publication of information pertaining to the SQF Certification of this business, on the SQFI website (refer SQF Code) and to complying with the rules of the SQF Certification Shield Logo & Rules of Use, located on the SQFI website.

Full Name of Signatory:

Signature:

Title of Signatory:

Company Name:

Date:

CONTROLLED FORM