

# NSSP Standardized Shellfish Processing Plant Inspection Form

Agency Name:						Date		
Type of Inspection <input type="checkbox"/> Certification <input type="checkbox"/> Pre-operational <input type="checkbox"/> Routine <input type="checkbox"/> Follow-up <input type="checkbox"/> Standardization								
Dealer Name:					Certification Number			
Dealer Address:								
<b>Hazard Analysis Critical Control Point (HACCP)</b>								
1.	<b>HACCP Plan</b>		Yes <input type="checkbox"/> No <input type="checkbox"/>	Required for Certification				
2.	Plan Elements Identified and Adequate	Citation	<input checked="" type="checkbox"/> NA	Code	Citation	<input checked="" type="checkbox"/> NA	Code	
	(a) Hazards	X.01.C.(1)		O	(e) Critical Control Points X.01.C.(2)		K	
	(b) Records	X.01.C.(6)		O	(f) Monitoring X.01.C.(4)		K	
	(c) Critical Limits	X.01.C.(3)		K	(g) Verification Procedures X.01.C.(7)		O	
	(d) Name, Address, Signed and Dated	X.01.H.(1) X.01.D.		O	(h) Corrective Action if identified X.01.C.(5)		K	
3.	<b>HACCP Training</b>		Yes <input type="checkbox"/> No <input type="checkbox"/>	Code O	Activities	Records		
4.	<b>Plan Implementation</b>		<b>Corrective Actions Recorded (K)</b>		X.01.F.(1)	X.01.F.(4)		
			<b>Verification Procedures (K) (Signature)</b>		X.01.G.(1)	X.01.G.(1)(c)		
			<b>Monitoring Procedures (K)</b>		X.01.C.(4)	X.01.C.(6)		
			<b>Records: Accurate/ Maintained (K) Format (O)</b>		X.01.H			
			<b>Initialed/Dated (O)</b>		X.01.H	<input checked="" type="checkbox"/> NA		Code
			<b>Firm's Name on record (O)</b>		X.01.H			
	(a)	Receiving						
	(b)	Shellstock Storage						
	(c)	Processing						
	(d)	Shucked Meat Storage						
	(e)	Other Critical Limits						
5.	Approved Source Control Failure			.01 A			C	
6.	Time/Temperature Control Failure			.01 A,B,C,D			C	
7.	Other Critical Control Failure			.01 A,B,C,D,E,F			C	
	<b>Sanitation Items</b>			<b>Citation</b>	<input checked="" type="checkbox"/> NA	<b>Code</b>		
8.	Safety of water for processing and ice production			.02A				
9.	Condition and cleanliness of food contact surfaces			.02B				
10.	Prevention of cross-contamination			.02C				
11.	Maintenance of hand-washing and toilet facilities			.02D				
12.	Protection from adulterants			.02E				
13.	Proper labeling, storage, and use of toxic compounds			.02F				
14.	Control of employees with adverse health conditions			.02G				
15.	Exclusion of pests			.02H				
16.	Sanitation Monitoring and Records						S(K/O)	
	<b>Additional Model Ordinance Requirements</b>			<b>Citation</b>	<input checked="" type="checkbox"/> NA	<b>Code</b>		
17.	Plants and Grounds			.03A				
18.	Plumbing and related facilities			.03B				
19.	Utilities			.03C				
20.	Disposal of other waste			.03D				
21.	Equipment condition and cleaning, maintenance, and construction of non-food contact surfaces			.03E				
22.	Shellfish storage and handling			.03F				
23.	Heat shock			.03G				
24.	Supervision			.03H				
25.	Transportation (To include only the person shipping)			IX.05			K	
26.	Labeling and Tagging			X.05,.06,.07			S (K/O)	
27.	Shipping Documents and Records / Written Recall Procedures			X.08, .03			K	
<b>Dealer's Signature</b>				<b>Inspector's Signature</b>				